"We want adequate staffing and pay that meets inflation"—Striking Stanford nurses speak out

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As the strike of roughly 5,000 nurses at Stanford Health Care and Lucile Packard Children's Hospital in Palo Alto, California, reaches its fourth day, many nurses on the picket line understand that their contract will set the standard for pay and conditions for nurses across California and the US.

The strike is taking place amid an emerging wave of protests and limited strikes by nurses at Sutter Health in Northern California, Cedars-Sinai Hospital in Los Angeles and the University of California Los Angeles Medical Center.

However, it is not only nurses but hospital administrators and their investors that are aware of what is at stake in the strike. As a result, tremendous resources have been devoted to beat back the Stanford nurses, to isolate and wear them down. The hospital administrators are currently paying travel nurses \$13,000 a week, or roughly \$216 an hour, to act as scabs. The hospital has also threatened nurses that if the strike lasts into May, strikers will lose health care coverage for the entire month, regardless of when a contract is reached.

The Committee for the Recognition of Nursing Achievement (CRONA), which is currently in negotiations with Stanford Health Care over the contract, has advised its members to prepare to purchase their own health care coverage next month.

Under these conditions it is imperative that the striking nurses at Stanford unite with other nurses across California to expand their struggle. Reporters from the *World Socialist Web Site* distributed a statement calling for a California-wide strike by health care workers to back the Stanford nurses and spoke with several picketers about their working conditions

and their views about broadening the strike.

A Stanford nurse diabetes educator, Rachel, whose name has been changed to protect her from retribution, explained to WSWS reporters why she was out on strike. "Safe staffing, retention, not such high turnover, better pay, better benefits, good retirement for us, and don't take away our medical benefits just because we're fighting for ourselves."

Describing conditions in the hospital, she explained, "You're not allowed to take the vacation time you've earned. They rely on overtime for staffing, so it's not safe. It's not safe staffing."

This last winter's wave of the highly transmissible Omicron variant of SARS-CoV-2 ripped through the population, shattering records and infected even fully vaccinated frontline health care workers. Nurses and other workers not only had to deal with the flood of COVID-19 patients packing and overflowing hospitals but also faced the wave of infection and reinfection that greatly affected the staff. While thousands of health care workers were out sick, often hundreds in a single hospital, hospitals promoted infection by changing their quarantine guidelines from 10 to 5 days matching the anti-scientific CDC guidelines to accommodate the staffing shortages.

Under such extreme working conditions, health care workers inevitably suffered from burnout, with many choosing to leave the profession after more than two years of the pandemic when they were witness to the suffering and deaths of their patients, both children and adult, family members and coworkers.

Rita, a nurse with 40 years experience, said, "Our core demand is not money but staffing ratios. We need enough nurses to deal with the number and acuity of

the patients. Right now we will be sending a text 5 out of 7 days asking for someone to help cover shifts. We are working without breaks or lunches. The union is working on incentive programs and part of that is monetary to get more nurses in. We are taking new grads and training them with no commitment for them to stay. A lot move to another hospital closer to where they live, even if it means a pay cut."

Casey, another nurse at Stanford Health Care, was asked about RaDonda Vaught, the nurse in Nashville, Tennessee, who was unjustly convicted for a deadly medication error. "It sets a dangerous precedent, and we support all nurses. We are all experiencing burnout, and we are fighting."

While many nurses emphasized staffing ratios as a central concern, Stanford nurses also live in one of the most expensive regions of the world and the rising cost of living plays a major role in their struggle.

Stephanie told the WSWS, "We are striking for adequate staffing ratios and pay that meets inflation. I see on social media that a lot of other nurses think we are paid a lot, but they don't know the cost of living here. Everyone needs to commute in. Seven percent is already a pay cut with inflation."

Asked about the cost of living in the area, Rachel noted, "It's extremely difficult. I don't have to commute as far because I have a spouse that's employed. Many people are not in my position, and I have colleagues who commute an hour or two hours minimum."

When asked if she had a message for health care workers at Sutter, Cedars-Sinai, Kaiser and beyond, Rachel made the following call: "Keep fighting. Keep fighting. That's the only way we're going to get the respect we deserve."

Amy, a nurse with 2 years' experience, said, "When it comes to wages, we need to be going as far as we can go given the cost of living. Now the hospital is taking away health care and really working against us."

Tina, a coworker, added, "The hospital says they don't have funds, but then you see what they are paying the strikebreakers."

John, a retired nurse at Stanford Health Care with 45 years of experience, expressed solidarity with the striking nurses in opposition to the health care giant's profit-driven demands. "It's an attack on the profession, really, to not support them like they should

be. This isn't the only strike that I've attended. I'm supporting nursing, period, wherever it is." When a WSWS reporter made the case for a united struggle with health care workers across the state, John agreed, "Absolutely. Strength in numbers."

The powerful corporate, financial and political forces on Stanford Health Care's board of trustees are determined to resist the demands of nurses and are relying of CRONA and the major statewide nurses unions to isolate the strike and starve the nurses into submission.

To prevent this, nurses throughout California must prepare united strike action to support the Stanford and Lucile Packard nurses. Nurses should elect a rank-and-file strike committee, made up of the most militant and class-conscious workers, to establish direct lines of communication with Sutter, Kaiser, University of California and other nurses and build up support for statewide strike action.

At the same time, nurses need their incomes protected throughout the strike. Rank-and-file workers must demand that the assets of CRONA and the major statewide health care unions—including the California Nurses Association (CNA)/National Nurses United (NNU) and United Healthcare Workers (UHW)-West—be used to insure the full income of striking workers.

Are you a striking Stanford or Lucile Packard nurse? Contact us to discuss what you see as the major issues in your struggle and how to unite nurses across the state and more broadly in common action.



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