Media Backgrounder
For St. Vincent Nurses Strike
Beginning March 8 at 6 a.m.

The 800 nurses at St. Vincent Hospital, who are represented by the Massachusetts Nurses Association (MNA), are preparing to wage an open-ended strike against Dallas-based Tenet Healthcare on Monday, March 8 at 6 p.m., after a two-year effort by the nurses to convince their employer, Dallas-based Tenet Healthcare, to implement desperately needed staffing increases to improve the patient care conditions at the facility, poor conditions that have only been exacerbated by the pandemic.

Below we provide information on the history of negotiations with Tenet, the state of patient care at the hospital, the steps nurses have taken to move Tenet to respond to the crisis, the specific proposals the nurses are seeking to prevent the strike and improve patient care, and information about Tenet’s extensive financial resources to support the changes the nurses are seeking in their new contract.

Status of Negotiations

The nurses and Tenet began negotiations for a new union contract in November of 2019. To date, 32 sessions have been held between the parties, with the last several involving a federal mediator.

The nurses voted overwhelmingly on Feb. 10 to authorize the strike, and on Feb. 23 they issued the required 10-day notice to conduct an open-ended strike beginning at 6 a.m. on March 8.

The planning for the strike intensified following failed negotiations on March 3, when Tenet walked away from the table, having once again refused to address the nurses’ longstanding call for desperately needed staffing improvements to ensure safer patient care. It is important to note that it wasn’t until a session on Monday, March 1, that Tenet for the first time made any proposal to address nurses’ key issue driving them to strike, which was staffing. Unfortunately, their proposal only addressed staffing on two units, with no changes to dangerous staffing conditions on 10 other units where the majority of patients are cared for, including the critical care units, emergency department, maternity, behavioral health and other medical surgical floors. The proposal also failed to include any increases in support staff, such as secretaries and patient care assistants on the units, as well as patient care observers to watch over patients at high risk for a fall so that nurses can focus on providing care to acutely ill patients.

“It is clear from Tenet’s hardline stance on staffing that they are intent on forcing nurses to strike,” said Marlena Pellegrino, RN, co-chair of the bargaining unit. “We are sad to see that Tenet holds so little value for our patients, yet we are resolved to do whatever it takes for as long as it takes to protect our patients, as it is safer to strike now than allow Tenet to continue endangering our patients every day on every shift. As we prepare for a strike, we are always ready to get back to the table to negotiate whenever Tenet is ready do the same.”

The strike will be the second strike by nurses at St. Vincent Hospital against Tenet, as the nurses waged a successful 49-day strike in 2000 to achieve their first union contract. That strike ended with a settlement reached in the DC offices of Senator Edward M. Kennedy, where the nurses achieved landmark provisions to limit the use of mandatory overtime as a staffing tool, one of the first settlements in the nation to provide such a protection.
Background on Staffing Crisis

For two years nurses have been struggling to care for patients without appropriate staffing levels for both nurses and support staff, inadequate supplies and equipment, with an administration that has shown no interest in working with the nurses to improve these deplorable conditions. And the situation has only become worse during the pandemic where in addition to the lack of staff, nurses have lacked adequate personal protective equipment and seen Tenet furlough staff that could have been allocated to better care for the influx of patients with COVID-19.

In the last year alone, nurses have filed more than 600 official “unsafe staffing” reports (more than 110 such reports have been filed since Jan. 1, 2021) in which nurses informed management in real time that patient care conditions jeopardized the safety of their patients. The nurses also report their patients in Worcester are experiencing an increase in patient falls, an increase in patients suffering from preventable bed sores, potentially dangerous delays in patients receiving needed medications and other treatments — all due to lack of appropriate staffing, excessive patient assignments, and cuts to valuable support staff. Nurses also have sent personal emails to management and confronted the hospitals’ recalcitrant CEO with their concerns on her visits to hospital units.

Other efforts to move to Tenet to improve care include:

- Last February, more than 70 percent of nurses signed and delivered a petition to Tenet administration calling for safer staffing levels and an end to management’s punitive treatment of nurses, and this was before the onset of the pandemic.
- In March, again, prior to the first surge in the pandemic, more than 200 nurses from every unit and every shift attended a negotiation session with management to provide alarming personal testimony about the impact current staffing levels were having on patient care, with numerous nurses describing conditions at the hospital as a “travesty...disgraceful...and shameful.” They described numerous patient falls, the onset of serious preventable complications, suicidal patients being left without one-on-one monitoring, and even preventable deaths directly attributable to inadequate staffing levels and unsafe nurse patient assignments.
- In May, after management implemented a furlough of staff, and daily staffing cuts (a process referred to as flexing staff) and other negative staffing practices, the nurses cast an overwhelming vote of “no confidence” in hospital CEO Carolyn Jackson and her management team. No action was taken to address the concerns.
- During the last 10 months alone, as a result of these conditions, more than 100 nurses have left the facility for other hospitals, specifically UMass Memorial, with better staffing, pay and benefits.
- In December, more than 400 nurses participated in an informational picket to call for public support for safer staffing, particularly in light of the growing second surge of the pandemic.
- And starting in January, dozens of nurses have been participating in daily picketing in an effort to move Tenet to address our number one concern — safe staffing.

Still, management has done little or nothing to address nurses’ concerns. In fact, as nurses prepared for the second surge, the hospital refused to put in place standards of care, such as the creation of COVID specific units with strict limits on nurses’ patient assignments to no more than three patients that were in place during the first surge. Now, to the shock and dismay of the nurses, the hospital is insisting on comingling COVID and non COVID patients; and creating conditions that force nurses to take up to five patients at one time — a reckless practice that endangers both patients and nurses. They have also laid off secretaries and other support staff, thus exacerbating an already dangerous practice environment. When the nurses finally convinced management to meet with them to hear their concerns and recommendations, the chief nursing officer abruptly ended the meeting, refusing to address any of the issues raised.
“Our nurses have been sacrificing for our patients, family and communities throughout this pandemic,” said Dominique Muldoon, a nurse who worked on the COVID floor during the first surge and co-chair of the nurses local bargaining unit. “Nurses have moved out of their homes or isolated from loved ones. Our members have been exposed or infected with this virus in our efforts to provide care to these very sick patients. Our members have witnessed unbearable suffering and been the only ones with patients, or been the conduit of all communication with families as they watched their loved ones die. For nurses, this is our duty and our obligation, and all that we ask is to be treated with respect and to be given the resources to perform this noble work.”

**Staffing/Patient Care Improvements Sought by Nurses**

The nurses have spent more than a year in negotiations with management for a new contract that would include the staffing improvements nurses need to provide safe patient care, as well as improvements in pay and benefits to compete with other hospitals in the region, with the staffing improvements the key stumbling block to a settlement, and the issue Tenet refuses to address. Those improvements include:

- Improvements to the current staffing guidelines to ensure all nurses have safe patient assignments and support staff to ensure safe patient care. These improvements are consistent with the standard of care provided at UMass Memorial Medical Center and a number of other hospitals in the state. **This is a key point for reporters to understand, as Tenet falsely claims that St. Vincent has some of the best staffing in the state. First, this is not true. Staffing is better at UMass Memorial Medical Center.**

- Creation of a pool of nurses who are expert in caring for critically ill patients, which is essential to support nurses in the emergency department who in addition to taking care of five or six patients, are also expected to care for patients in need of ICU level care, who are waiting for a bed to open in the ICU.

- The addition of what are called “STAT and Rapid Response” nurses, which are nurses who would be available to be assigned to floors and units when census increases, and the needs of the patients are more complex. These nurses are especially important to support newly graduated nurses, who may lack the experience to care for more challenging patients, or patients who may be in crisis. Again, UMass Memorial Medical Center provides this level of support to its nurses.

**Tenet Can Afford Safe Patient Care**

While nurses call for improved staffing levels, adequate PPE and the pay and benefits they need to recruit and retain the staff they need to meet the challenges of the pandemic, Tenet Healthcare’s focus has been on cutting corners and recouping revenue to boost their bottom line, expecting nurses and patients to pay the price for their decisions.

Back in April of last year, Tenet’s corporate leaders in Dallas touted their plan to use furloughs and hundreds of millions of taxpayer dollars from the federal stimulus package “to ensure we were focused on maximizing our cash position” – not to improve care for patients, according to the Dallas Morning News. Tenet has received more than $2.8 billion in loans and grants from the federal government as part of the CARES Act. During the first three quarters of 2020, the corporation generated more than $12 billion in revenue, and now has cash or cash equivalents of more than $3 billion, a 10-fold increase over 2019. **In fact, on Feb.10, the same day the nurses voted to authorize their strike, Tenet announced an annual profit of $414 million. On March 2, the nurses’ watched Tenet’s stock hit a high of $54 per share, a more than 100 percent increase over the previous year.**
In addition, while other hospitals have cut back on elective surgeries to free up additional staff to support care for COVID-19 patients, Tenet has pushed ahead with procedures, such as knee and hip replacements, colonoscopies and cosmetic surgeries to generate revenue at the expense of care for COVID patients.

St. Vincent Hospital has been one of Tenet’s most profitable hospitals, and St. Vincent is one of the most profitable hospitals in Massachusetts. In fact, St. Vincent Hospital generated more than $355 million between 2014 and 2019. In 2019, the hospital posted record profits of more than $73 million, a profit margin of 14 percent, four times the state average for hospitals and five times the profit margin for UMass Memorial Medical Center, a facility that provides the staffing levels the nurses at St. Vincent are seeking, while also paying their nurses significantly more and providing better health and pension benefits.

Nurses believe that Tenet can easily afford to provide the improvements the nurses are seeking, but the nurses see the decisions being made on the local level being driven by corporate heads in Dallas. Nurses view St. Vincent CEO Carolyn Jackson, a chemical engineer by training with no prior experience in caring for patients, as a willing tool for Tenet corporate management in Texas.

“Tenet is a for profit healthcare conglomerate, and we cannot stand by while they take advantage of a global pandemic to, in the words of their Dallas-based CEO, ‘maintain a strong cash position.’ The voices of our bedside nurses must be heard,” explained Marie Ritacco, RN, a nurse in the Post Anesthesia Care Unit and Vice President of the Massachusetts Nurses Association. “We hold that patient care and the safety of the caregivers must be prioritized before profits going to Dallas and the shareholders. We will do everything in our power to shed sunlight on the decisions we believe fail to protect our patients, our community, and our families.”

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Founded in 1903, the Massachusetts Nurses Association is the largest union of registered nurses in the Commonwealth of Massachusetts. Its 23,000 members advance the nursing profession by fostering high standards of nursing practice, promoting the economic and general welfare of nurses in the workplace, projecting a positive and realistic view of nursing, and by lobbying the Legislature and regulatory agencies on health care issues affecting nurses and the public.