

[MUSIC PLAYING]

**KATHY:** And here's our top story. Thousands of Minnesota nurses have voted in favor of a strike at seven different health systems in the twin cities and Duluth.

**SUBJECT:** And I'll tell you what. We are the voice-- right now, in this nation, we are the voice of all the nurses all across the nation because I don't care what state you go to, we're all in the same boat.

Right now, we are heroines and heroes to every single nurse across this nation as they applaud us for standing together and working together to get 15,000 nurses all marching in the same direction. Do you know why? Because of what you heard behind us. We are forced to do this because our profession is at risk.

When I can get on a news report and comment on a report that came out that 51% of the nurses across the nation will potentially leave the bedside as of next year, that is a public health crisis, half of the nurses leaving the profession. So we are doing this to save our profession. We are doing this to save health care.

**KATHY:** It's the latest update in negotiations between the Minnesota Nurses Association and the hospitals, which have been at the table since last March. NPR's Tim Nelson's been following the vote. He's with us. Welcome back, Tim.

**TIM NELSON:** Hi, Kathy.

**KATHY:** So what do we know about how many nurses want to strike? How did the vote break down?

**TIM NELSON:** Well, we don't really know. The Minnesota Nurses Association says it's policy not to provide actual vote tallies, either for who voted for in favor of strike or not, or by bargaining unit or facility.

It's kind of a standard practice for labor unions not to publicly disclose this kind of information that might divide their bargaining units by indicating maybe some locations or units might have doubts about a strike or a contract agreement.

And that's not a trifling matter here. Four health care union bargaining units in the state have voted out unions this year, including Minnesota Nurses Association members that work for the Mayo Clinic down in Mankato.

This strike comes amid unprecedented challenges to union health care worker solidarity and that's really-- you heard that a little bit from President Mary Turner there in that opening comments. She was raising that very issue this morning. They're hoping to assemble what they call the biggest coalition of union nurses ever in a job action and really add some pressure to these hospitals to settle.

**KATHY:** So which hospitals could be affected?

**TIM NELSON:** Well, there's 15 of them. Here in the twin cities they include M Health Fairview Facilities, Riverside, Southdale, St. Joseph's, and St. John's. Abbott Northwestern, Mercy, United, and Unity are Allina hospitals, those four Allina hospitals. There are two children's hospitals in both Minneapolis and Saint Paul, as well as Methodist-- that's a HealthPartners hospital-- and North Memorial.

Up north in the twin ports this includes Saint Mary's in Duluth and Superior. They're both essential hospitals, as well as St. Luke's in Duluth. You might hear here that there are some key hospitals that are not in this list, including the big level one trauma centers, Regents Hospital in Saint Paul, Hennepin Health Care in Minneapolis.

So we're talking about a lot of hospital beds but not all of the hospitals in the region. But there's no question. This has a potential to really have a major impact on health care.

**KATHY:** Right, what issues are at play here?

**TIM NELSON:** There's a lot of things. Nurses, this morning, talked about scheduling issues, about protective measures against Covid, about nurses-- as you heard Ms. Turner saying, nurses quitting and not being replaced. They're leaving more work for the people left on the job.

They're talking also about what they say are the risks of dwindling staffing ratios for patients. And they're also talking about some of the same things that people are worrying about outside hospitals, about safety and security. They're worried about their safety in parking lots, in the hospital hallways, even in patient rooms. Here's Tracy Ducksworth, a mental health nurse at Fairview this morning.

**TRACY DUCKSWORTH:** I have witnessed multiple, multiple coworkers assaulted by patients, verbally assaulted by patients and families, with no help or support from our hospitals. We are asking for safety measures from our hospitals. They are telling us it costs too much. We are asking for staffing. They are telling us it costs too much.

**KATHY:** So Tim, what have the hospitals said in response?

**TIM NELSON:** Well, the hospitals, like the nurses say, they don't want to strike. They want to keep their facilities open. They want to care for patients. They expressed some disappointment that the nurses union took a strike vote yesterday in a statement in response to that vote. They called for the MNA, the nurses association, to join them in mediation. They said that worked for contract talks three years ago.

In sort of the nuts and bolts, they say they're offering the biggest wage increases in 15 years, between 10% and 12% total over the next three years. They also say they're not profitable, and that's really all they can afford. On the benefit side, they're promising to keep pension benefits. That's a rarity in the modern workplace. And they say they've reached some agreements already in matters like diversity, equity, and inclusion in the workforce.

They say they want to keep these hospitals going. They aren't detailing what measures they'll take in response to a possible strike here. Nurses dispute these economics. They say hospital executives are being handsomely paid, and they say the hospitals can afford to pay them more and make the changes they're asking for in working conditions.

**KATHY:** Well, you know that this is not the first time, if there's going to be a strike, that MNA would have walked off the job, right? There's been other nurses strikes in the past in the twin cities. But this feels big, unprecedented. I can't remember. How long has it been since the last nurses strike?

**TIM NELSON:** Well, the big one was back in 2016. There was a big Allina strike. There's also been some smaller ones here and there. But most people remember that big one in 2016, and the one day one in 2010. That last one six years ago, that went on for 37 days, almost the longest in state history. It ended only after Governor Mark Dayton brought everybody to the governor's residence and had this big marathon negotiating session.

That strike in 2010 is coming up again, actually came up again today. Mary Turner alluded to that, noting that it was-- that was multiple hospital systems that went out together. And it only lasted a day before it settled.

**SUBJECT:** The moral of the story, and I've said this more times than I can count, is that we all stick together. And now we have the added benefit of the Duluth contracts were up in June 30th. So we now have another 2500 nurses in northern Minnesota.

And I want to point out that Duluth handles all of the Michigan peninsula, all across northern Minnesota, all the way to North Dakota. They are like the safety net of the north, and now those two hospitals will be on strike. They have to think about that.

**TIM NELSON:** They may have some critical mass here that they're putting together.

**KATHY:** Right, now the vote does not mean nurses are going to immediately walk off the job, right?

**TIM NELSON:** That's right. The union officials say they're meeting tonight to talk about their strategy, including a potential first and last day of the strike. MNA President Mary Turner told me that it wasn't going to be an open-ended strike like the 2016 walkout. But she also said this wasn't going to be another one-day strike like that informational job action that nurses took back in June.

They probably aren't going to offer a lot of detail on that tonight or tomorrow, but whatever happens, they're going to have to give a 10-day notice and wait through a cooling off period before they walk out of the hospitals. Turner also said they're willing to keep bargaining up until the very last minute.

**KATHY:** And no idea, Tim, in terms of what hospitals plan to do to staff up in case there is a strike?

**TIM NELSON:** No, obviously, hospital staffing is a complex system of human resource management, licensing, compensation, other factors. There have been some nurses that came in to work as replacements in the past.

But it's really unclear, post-pandemic and amidst the existing recruiting crisis, what the availability of other nurses is going to be. I'd expect there's going to be some limits to admissions and postponements of non-emergency care and procedures if they're really short of nurses in a walkout.

**KATHY:** All right. Tim Nelson, thank you so much.

**TIM NELSON:** You're welcome.