

Twin Cities nurses: A strong 'yes' to strike

The vote to OK an open-ended walkout raises the stakes for both sides.

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STRIKE TALKS: THE KEY STICKING POINTS

- **Nurses want** limits on how many patients may be assigned to each nurse.
- **Hospitals want** more flexibility to move nurses where they are needed.

For the second time in five weeks, Twin Cities nurses have voted to go on strike.

And this time, the walkout could last longer than 24 hours.

Members of the Minnesota Nurses Association turned out by the thousands Monday to authorize an open-ended strike at 14 hospitals. No date has been set, and union officials have said they would hold off on giving the required 10-day notice if the two sides were in "productive negotiations." At the earliest, a strike could begin in early July.

After conducting a one-day strike on June 10, union officials decided they needed the leverage of the strike authorization to pressure the hospitals to reach a favorable agreement.

Maureen Schrinier, a spokeswoman for the hospitals, issued a statement late Monday, saying: "We are disappointed in the ongoing insistence of the nurses' union to build its entire negotiating strategy on threat of strikes." She added that the hospitals want a fair contract, and that "strike planning doesn't help achieve that goal. Given that a full-time nurse in the Twin Cities makes an average of \$79,000 per year and can gain full benefits for working 16 hours a week, a strike seems out of step with today's environment, and it certainly doesn't reflect a primary interest in patient care."

A two-thirds majority was required to authorize the strike at each of the six hospital groups involved in the contract talks. The union said late Monday that the vote was 84 percent in favor of a strike.

The vote sets the stage for a possible indefinite work stoppage that could inflict painful costs on both sides, testing the economic staying power of the 12,000 nurses and the resilience of the hospitals.

MNA members turned to the union's Facebook page to celebrate. "I have never been more proud to be a nurse than I am at this moment," one wrote.

Wrote another: "History in the making, the nation has their eyes on us, good job Minnesota." Some predict the vote could increase the incentive for both sides to settle.

"This puts additional pressure on the employer, shows the nurses are willing to go to extreme lengths to obtain their goals," said John Remington, professor of human resources and labor studies at the University of Minnesota's Carlson School of Management. "The stronger the support, the stronger the message it sends to the employer."

The hospitals, meanwhile, have been preparing to hire replacement nurses, just as they did for the one-day strike.

Schriner said the next step is up to the union. "We do want to work something out that we can negotiate," she said.

Contract talks broke down June 4 over disagreements on pensions, wages, staffing proposals and benefits, and the two sides have not been able to agree on conditions for returning to the bargaining table. "The June 10th strike, no one won out of that," Schriner said. "There's no benefit to going on another strike."

As they gathered to cast their ballots Monday, the mood differed noticeably from the last strike vote in May, when the atmosphere was almost festive.

"There's a much more somber mood," said Joni Ketter, the union's director of organizing. "For a nurse, especially, to authorize an open-ended strike is a big deal."

But many nurses hope they won't have to make good on the strike threat.

"We still have time to negotiate," Debbie Ingram, a nurse and union representative at Fairview's Riverside campus of the University of Minnesota Medical Center, said before vote results were released.

As they filed in by the hundreds, through halls lined with picket signs, some nurses described how the labor battle is causing friction at work.

"There is more tension between the nurses that are voting yes, and the very few that say they're going to cross the picket line," Ingram said. "And that's starting to get uneasy."

Tamyka Carr, a nurse at St. Joseph's Hospital in St. Paul, called the situation "kind of scary" as she headed to cast her ballot. "You want both sides to be happy," she said with a sigh.

Patty Kovalik, a nurse at St. John's Hospital in Maplewood, said she just wants both sides to sit down and talk. "We don't want to go out on strike," she said, "but we don't want to lose our contract, either."

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