

# 'Angels In Sneaks' out there fighting for a fair shake

Rubén Rosario



I threw up on a nurse once. I was undergoing chemotherapy years ago and my stomach felt like Mount St. Helens about to explode. I pushed the button. In came an angel in sneaks, my moniker for nurses.

She was about to help lift me off the hospital bed when I lost control and could not hold it inside any longer. Splat.

I got her good.

"I'm so sorry," I muttered sheepishly.

I received a caring, concerned look on her face.

"Don't worry. It's happened before. Not feeling well?"

I've been in love with nurses ever since. They could be female, male, young, old, short, tall. It doesn't matter. Some have a little trouble drawing blood. Others do it flawlessly.

I'm sure some can be impatient, curt and ornery. Hospitals, like everywhere else, do recruit from the human race. But I've never had one of those during my numerous health crises over the years.

So when I saw a line of them walking the street, pushing kids in strollers and holding up signs outside Children's Hospital in St. Paul on Thursday morning that read: "Assaulted" and "Nurses outside, trouble inside," I pulled over.

Turns out [Minnesota Nurses Association](#) bargaining units representing 13,000 reg-

istered nurses in the Twin Cities metropolitan area have been involved in what they describe so far as fruitless contract negotiations with management since March.

Children's in St. Paul was among seven medical facilities where nurses staged information pickets Thursday. I cornered Tracey Dittrich, an angel in sneaks for 20 years now over at Children's Minneapolis, to give me the skinny on the labor unrest.

"We are out here to advance the profession and address workplace violence," she said. "We have not fully negotiated a contract since 2010."

At that time, hospitals here and nationwide were reeling financially during the recession, and nurses responded by making some concessions and agreeing to zero or 1 percent annual wage hikes.

But times are different now, Dittrich said. Children's Minnesota reported \$46.4 million in excess revenue and operating income last year. In 2011, the figure was \$6.6 million.

According to an NBC News report, an Axios financial records analysis found that the largest nonprofit hospitals earned a collective \$21 billion in investment income in 2017. The report noted that the figure nearly tripled their 2.7 percent operating profit on patient care and that the 6.7 percent profit margin these hospitals earned more than doubled from the previous year.

Dittrich noted that violence against nurses by patients, family members and others, a major contract concern, has increased during her 20 years

on the job, even at the pediatric facilities.

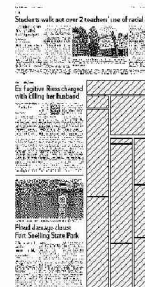
"Some children have mental health issues," said Dittrich, an emergency room nurse and mother of three from Champlin. "Families are in crisis, and people deal with things differently. We can understand what's causing it, but we need the protection to know that we are safe when we work."

Although some hospitals have agreed to address the violence concerns, others have not, said Rick Fuentes, an MNA spokesperson at the St. Paul picket site Thursday.

"The epidemic of workplace violence happens every day in every unit of every hospital," he noted. "It's not sexy so it doesn't get covered. But it's daily incidents of nurses hit, kicked, punched, spit on by patients and their families. There were 3,000 calls for help in 2018 at Allina hospitals alone."

A spokesperson for a firm handling public relations for the hospitals undergoing contract talks said Children's Minnesota did agree to MNA's workplace violence prevention proposal during negotiations last week. She also noted that the nonprofit pediatric hospitals' operating income is reinvested back to the care for patients and families. The hospitals also underwrote \$95 million in unreimbursed medical care last year.

"We remain hopeful and optimistic that we can reach agreement on a new contract soon," said Andrea Mokros, senior vice president for corporate and public affairs at Weber Shandwick. "We are



committed to ensuring our patients and community have the continuity and quality of care they deserve and depend on from our hospitals.”

Fuentes, who attended the May 14 negotiations, had a different take.

“Children’s offered a scaled down version of what Methodist Hospital offered, but only if nurses dropped the economic proposal,” he explained. “It was an either/or proposition — you can be safe or you can get paid.”

Dittrich said members are also trying to negotiate better health care coverage and dismissed the notion that nurses get a discount or a better insurance deal than the public because they work in the medical profession.

“I wish that were the case,” she said. Her family insurance premiums jumped by 20 percent last year for the same coverage to over \$500 monthly. The maximum \$2,600 of pre-tax dollars in the family’s Health Spending Account goes to tend to the medical and medication needs of her 12-year-old daughter, who was diagnosed with Type 1 diabetes several years ago.

Dittrich also noted that although assaulting emergency room personnel is an automatic felony under state law, it’s not the case when it takes place on other floors and locations in a hospital. The union is also seeking to have employers pick up the tab for the first three days of absence after a nurse is severely injured on the job before worker’s compensa-

tion kicks in. Right now, injured nurses cover those days with sick or vacation time. Another request is to enact a policy that gives a nurse the right not to tend to a patient who assaulted them on a prior occasion.

I had difficulty hearing Dittrich at times because of the number of cars that passed by and honked their horns in support.

“I’ve seen a resurgence of interest again and support for labor unions,” Fuentes said. He noted that nurses at a hospital in Bismarck, N.D., recently voted to unionize earlier this year.

“And that’s in a right-to-work state,” Fuentes said. He cited other unionization examples taking place in Iowa and Wisconsin in recent years. “Some don’t have to pay dues, but they do it voluntarily.”

Dittrich was impressed by the number of younger nurses out Thursday on the lines.

“People talk about millennials, but I have found many of them to be the first ones to fill out surveys and read updates,” she said. “It’s refreshing to see. Some cannot believe we have a pension and a board of hospital executives and nurses who work together to invest wisely.”

I felt a need to also apologize to Dittrich for throwing up on one of her colleagues years ago.

“Oh, it happens,” she said before picking up a sign and joining the line. “As long as you did not slap, punch or kick. We are looking for fair wages, decent health insurance and a safer workplace. We are reasonable people ...”

The angels in sneaks deserve some TLC of their own.



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Nurses Michael Scribner-O’Pray and Tracey Dittrich outside Children’s Hospital in St. Paul on Thursday.