



Lockouts

Rumors are flying that the Borgess Medical Center administration is considering locking out its entire staff of over 700 professional registered nurses. Here are some things to know:

- A lockout is implemented and ended by management.
- No notice of implementation date is required.
- Employees who have been locked out are not eligible for unemployment benefits since lockouts are the result of a labor dispute.
- Employees may retain insurance benefits, depending on the plan, etc.
- If a lockout is found to be unlawful, an employee retains all accumulated PTO, seniority levels and so forth.
- If a lockout is found to be unlawful, an employee is entitled to back pay, etc. as part of a “make whole for all losses” award

These are the hard facts. But let’s look at the actual situation:

- The Borgess management is already whimpering that patients (4 of them) are going elsewhere due to the nursing “unrest.”¹ Imagine how patients in the Kalamazoo community will behave if the hospital locks out its professional nurses. The community upheaval and lack of trust would be felt by Borgess for months, possibly years. Any community would be aghast at such behavior.
- Replacement nurses are extremely expensive. In a chat room on allnurses.com² in mid-March 2010, contributors wrote in that Huffmaster, a leading firm specializing in scab workers was offering “\$40.00 per hour, pay for your nursing license if you work out of state, pay for housing, and relocation” while another said that Huffmaster had offered them “\$4,400/week.” That’s quite an outlay of cash for a hospital to spend when all it would take is sitting down at the table and negotiating a fair contract with its nurses.
- Patient safety. Replacement workers are not necessarily safe, especially when a group is brought in all at the same time. 1,500 nurses employed at Temple University Hospital in Philadelphia are currently on strike for a fair contract, and 850 scab nurses have been brought in all at once to cover the shifts. At one point on the line, the Temple nurses were joined by a patient who had escaped from the critical care unit to seek out nursing care – reports are now coming out that the scab nurses are not keeping sterile environments, paying attention to patients and so forth. Noted nursing researcher Linda Aiken had reservations about the situation. 850 new people at once raises questions, she told a reporter from *The Philadelphia Inquirer*. “Clearly that would be a major upheaval in any organization of any kind,” she said.³

So – patient lack of faith, financial burden and most certainly patient safety issues. Would a lockout really be worth it?

Remember that threatening a lockout is just that – it’s a threat designed to make you fearful and settle for whatever management offers just to make the threats stop. You are being bullied by the people who say they have your best interests at heart.

The Borgess management has stated that it “remains committed to preserving our hard-earned reputation for providing outstanding patient care and will continue its good faith efforts to negotiate a new contract.”⁴ There is nothing about locking out their nurses, either as a threat or its implementation, that fits into this statement.

Our trust in Borgess appears to be misplaced.

¹“Certainty vs. Uncertainty,” Borgess & MNA Negotiations: April 19, 2010 UPDATE

²allnurses.com, pulled from <http://allnurses.com/michigan-nurses/potential-strike-michigan-457289.html> on 4/23/10

³“Is this a good time to be a patient at Temple?,” *The Philadelphia Inquirer*, 03/31/10, pulled from: <http://www.philly.com/philly/news/breaking/89641292.html> on 4/23/10.

⁴“Certainty vs. Uncertainty,” *ibid.*



<http://www.bmcnrn.com>