

Talks continuing at Watsonville Hospital

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Watsonville Community Hospital could stop admitting patients today and start moving its 80-plus patients by tomorrow, depending on the outcome of today's negotiations with the hospital's registered nurses.

Today's session began at 9 a.m. with a federal mediator and was still in progress at press time.

"The outcome of this meeting will dictate whether we will stop admitting patients," Kathleen King, the hospital's direc-

tor of development, said this morning.

To prepare for the already-authorized strike, due to start just after midnight Friday, patients at the 130-bed hospital would be discharged to other hospitals beginning as early as tomorrow, King said.

John Heacock, president-owner of A-1 Ambulance Service based on Freedom Boulevard in Watsonville, said he planned to station an ambulance at the hospital's emergency room if the nurses walk out.

Paul Estess, the hospital's chief executive officer, has informed him that the emergency room would remain open to provide for walk-in patients, Heacock said. Patients would then be transported to other hospitals, he said.

Heacock stressed that ambulances cannot transfer patients to walk-in clinics, or any facilities other than hospitals.

Jane Breen, a registered nurse in the hospital's emergency room and chairman of the nurses' negotiating committee, said yesterday a strike was likely.

"Things look very bad," Breen said yesterday.

The California Nurses Association, the union representing 171 registered nurses at the hospital, has rejected the administration's proposal for a 5.6 percent increase in wages and benefits in the first year of a proposed three-year contract.

The union is seeking an 8 percent increase in wages and 8½ increase in benefits in the first year, King said.

An increase in cash benefits, which includes extra incentive pay for nurses working nights

or part time, has been agreed on, however.

Talks were continuing at 11 a.m. today, and King said no progress had been made.

She said that if no progress was made by later today, a team of nursing administrators and physicians would probably be formed today to draw up the plan to "begin the orderly discharge of patients to other hospitals with available space."

Williard Hatch, the nurses' chief negotiator, said this morning, "If there's any need for an orderly discharge, we're not going to let anybody's life be put in danger, obviously."

Breen said better pay would help the hospital attract more nurses, relieve a shortage and provide better patient care. She pointed to the administration's closure several months ago of a floor of the hospital, and to periodic closures of the hospital's critical-care unit as proof of the hospital's nursing shortage.

"The nurses don't want to strike, and if it can be worked

out, it will," she said. "But if we can't, in the long run for the community, the strike may be the best thing."

However, Breen said nurses planned to suggest binding arbitration in an attempt to avoid a strike. Binding arbitration, in which both sides in a dispute agree to abide by the decision of the arbitrator, was used to avert a strike in 1980, Breen said.

She said, though, that she doubted administrators would be quite so willing to accept the proposal now, since the 1980 agreement "worked out exceptionally well for the nurses."

Registered nurses have drawn support from licensed vocational nurses, Breen said, but "the doctors are not with us."

Hatch said shortly after talks began today that binding arbitration had not yet been suggested, "but it will be discussed before the day is out."

REFERENCE