

April 12, 1971

TO: Medical Staff and Students

FROM: John L. Wilson, M.D.
Acting Dean, School of Medicine

SUBJECT: Sit-in at the Stanford University Hospital on April 8-9, 1971

On Tuesday, April 6, a noon rally was held on the lawn near the Medical Center by the Black United Front. The BUF is said to be a coalition of the Black Liberation Front, the Black Workers Caucus and representation from the Black Student Union. The Front was organized as a response to the dismissal of Mr. Sam Bridges, a hospital employee, and the laying off of workers at Tresidder. Following the rally on April 6, over 100 persons went to the office of Doctor Gonda, Director of the Hospital, and presented to him a list of 6 demands. They stated that they would return for a reply to these demands at noon on Thursday, April 8. As far as is known, the groups presenting the demands included few if any Hospital employees.

On April 9, another noon rally was held following which about 50 persons went to the office of Doctor Gonda stating that they expected to receive from him, in person, the reply to their demands. The reply had been printed in the Daily on that morning and copies of it were handed to the group. The demands, with Dr. Gonda's responses to them, are printed below:

1. "Workers must have the right to criticize administration policies from the date of hiring without intimidation."

All employees have the right to criticize administration policies. In addition, there are regular opportunities of communicating employee views to the administration. If there are any instances in which that policy has been violated, I would appreciate having the evidence brought to my attention.

2. "Workers must have the right to organize a union which represents the workers' interest."

Employees are free to decide if they wish to join unions. The Hospital was involved in a union election in 1967, and union organizing activities have been held regularly since then.

3. "Workers must have grievance rights from date of hiring."

Present Hospital policy is ambiguous on this point. Our practice, however, has been to make grievance procedures available to employees regardless of length of service. I will take steps to clarify the Policy Manual on this point.

4. "Workers must have the right to have peers present on all grievance procedures."

While the grievance procedure does not explicitly provide for the presence of peers at the early steps, our practice has been to allow it as is expressly set forth in later steps of the grievance procedure.

5. "The rehiring of Sam Bridges with pay for time loss."

Mr. Bridges was informed of the opportunity to file a grievance and was given a copy of the Hospital's Grievance Procedure (Section 525) and of the Rules of Conduct (Section 500) with those violations pertaining to him underlined. He has not chosen to bring his case before the Grievance Committee.

6. "Stanford Hospital must adopt an Affirmative Action Program."

Stanford University Hospital has an Affirmative Action Program, and is in the process of completing its documentation. For the past two years Stanford University Hospital has had a Black Advisory Committee selected by Black employees. More recently the Alianza Latina, composed of most of the Spanish speaking employees of the Medical Center, has been formed. These groups have been actively involved in the implementation of the Hospital's Affirmative Action Program.

All of the above demands, with the exception of the rehiring of Mr. Sam Bridges, were reported by Dr. Gonda to be already part of Hospital policy or positive action on them is imminent. The rehiring of Mr. Sam Bridges with pay for time lost was identified early as the chief issue. The Black Advisory Committee, consisting of Black Hospital employees, issued the following statement giving the reasons for the firing of Sam Bridges and their support of the action taken:

MEMORANDUM

TO: Hospital Employees
FROM: The Black Advisory Committee
SUBJECT: OUR STAND ON THE SAM BRIDGES CASE

We, the Members of the Black Advisory Committee, upon reading the charges made by Mr. Sam Bridges, did, in fact, conduct a thorough investigation regarding his dismissal.

The investigation disclosed the following facts.

- 1) On several occasions his co-workers complained that Mr. Bridges was not doing his work and that they had to carry his workload as well as their own.
- 2) On two particular occasions he verbally abused - 1) a co-worker because he was questioned about some work he had not done, and 2) a Security Guard because he was told that he had to put money in a parking meter.
- 3) He was found asleep on one occasion in the "Brown Bag" room while he was supposed to be working.

4) He was counselled about his work performance on at least three different occasions due to complaints by his co-workers.

5) He was observed on campus several times while he was supposed to be working.

The Black Advisory Committee can present evidence to substantiate these facts. It was our conclusion that Mr. Bridges was terminated because he was not doing the job he was hired to do, and therefore putting an added burden on his co-workers.

Had Mr. Bridges, after being told about the grievance procedure, chosen to take his case before the grievance committee, this Committee would have insured him fair and impartial treatment.

4/8/71

By late afternoon of April 8, the crowd in the administrative area on the second floor of the Hospital had increased to 80 to 100 persons and refused to disperse. They called for the personal appearance of Dr. Gonda. They occupied the entire administrative area making it necessary for the Hospital administrative staff to discontinue their work and to lock the offices. The doors on either end of the corridor were closed and people entering the administrative area were challenged as to their business. The locked administrative offices were broken into by removing a door from the hinges so that the entire complex of offices was occupied. Administrative personnel necessarily left the area and all the files, facilities, and resources of the administrative section including the emergency and disaster radio and special telephonic equipment were inaccessible for the use of the Hospital. The occupiers placed guards on the doors at each end of the administrative corridor. This corridor connects clinic and treatment facilities on one side with blood banking, laboratory and hospital wards on the other. Hospital personnel and patients were permitted to pass after identification through a corridor crowded with a large number of people. Certain personnel of the Medical Center were required by the occupying group to leave the administrative area while certain outside groups of individuals were allowed to come and go.

The Black Advisory Committee of Hospital employees met with the group occupying the premises and discussed their demands, chiefly the rehiring of Mr. Sam Bridges, at about 4 p.m. on April 8. After these discussions, the Black Advisory Committee issued a statement at about 5:00 p.m. stating that new information regarding Mr. Bridges had come to light in the discussions and that another meeting with the Black United Front would be held at 8:00 a.m. on the following morning, Friday, April 9.

It was hoped that arrangements for a meeting at 8:00 a.m. on the following morning would result in dispersal of the occupying group which, however, reiterated the demand that Dr. Gonda must meet with them in person before they would leave the administrative area. Therefore, at 7:00 p.m. on Thursday, April 8, Dr. John Wilson, Acting Dean of the Medical School and Executive Officer of the Medical Center, met for approximately an hour with the occupying group. They were informed that their action in taking

possession of the administrative area of the Hospital and inhibiting normal traffic between patient care areas constituted a disruption of Hospital function and was a threat to the welfare of the patients in the institution.

It was noted at that time that the group involved in the occupation consisted almost entirely of persons from outside the Medical Center and the University. A few Hospital employees were present. Discussions were conducted in a crowded, closed conference room by persons who did not identify themselves. It was not possible to learn who was the individual or individuals in charge of the occupation. It was now clear that complete control of the administrative section of the Hospital had been established. The demand for the presence of Dr. Gonda continued and it was agreed to call him to the administrative area in the hope of resolving the difficulties and terminating the occupation.

Dr. Gonda arrived about 10:00 p.m. and spent until midnight conferring with the group in an attempt to reach agreement on the demands and to terminate the occupation. Dr. Gonda reiterated an earlier assurance that the grievance procedure of the Hospital was still available to Mr. Bridges and that he would receive reinstatement and all back pay if the findings were in his favor. Agreement was reached with the Black United Front group on all of the demands except for the immediate rehiring of Mr. Sam Bridges. The group stated that they intended to occupy the premises until Mr. Sam Bridges was rehired. At 12:30 a.m. on Friday, April 9, it was obvious that a sit-in was intended. They were again urged to leave, were again strongly advised that their continued occupation was a disruption of Hospital function, and were told that it would be necessary for the University to seek legal advice on means to terminate the occupation.

At 8:00 a.m. on April 9, the Black Advisory Committee met with the sit-in group in the administrative suite and heard witnesses regarding the work performance of Mr. Bridges. The BAC then issued the following statement:

April 9, 1971

Hospital Employees

The Black Advisory Committee

Reinstatement of Sam Bridges

In a hearing held this morning by The Black Advisory Committee and The Black United Front, all of the charges made against Sam Bridges were reviewed. All available witnesses were confronted and their statements reanalyzed. The purpose of this hearing was to ascertain the true facts surrounding the dismissal of Mr. Bridges.

Due to new and pertinent facts brought out at this hearing, the Black Advisory Committee recommends that Sam Bridges be rehired and be retroactively reimbursed for total time loss.

The new and pertinent facts referred to in the above document were essentially a reversal by the witnesses of their original statements according to the Black Advisory Committee.

Doctor Gonda received the above recommendation from the Black Advisory Committee and agreed to submit it for review by an impartial referee acceptable to Mr. Bridges, the Black United Front and the University in accordance with the final stage of the grievance procedure of the Hospital. Mr. Henry Organ was acceptable as the referee to Mr. Bridges and the BUF. Doctor Gonda disqualified himself from the grievance procedure and agreed to recommend Mr. Organ to Acting President Miller. This was not acceptable as a solution to the sit-in group which, after 2 hours of discussion with Doctor Gonda, voted at 1:45 p.m. to sit-in until Mr. Bridges was rehired. Doctor Gonda did not agree with this demand and left the meeting.

Acting President Miller then wrote the following note which was delivered to the sit-in at about 4:30 p.m.

STANFORD UNIVERSITY

April 9, 1971

STATEMENT BY WILLIAM F. MILLER

Dr. Gonda has conveyed to me his recommendation for his replacement in the Grievance Procedure. I have that under consideration. However, we agree there will be no conclusion on the composition or dates for the Grievance Procedure while the occupation of the Hospital continues. Under existing circumstances, Dr. Gonda and I concur he should not return to the discussions.

[signed]
William F. Miller
Acting President

There was no response from the sit-in and no indication of any kind that the occupation would end. About 5:30 p.m. one of the sit-in members (Mr. Willie Newberry) is quoted by the Palo Alto Times as saying that they would occupy the premises until the Bridges' case was settled and that "they're going to have to restore the man."

After 30 hours of occupation and extensive but unsuccessful negotiations, it was considered necessary to invoke the trespass law and to call for its enforcement. The Palo Alto Police arrived at 5:45 p.m. and informed the sit-in that the occupation was unlawful. Many promptly left but more than 50 stayed, barricaded themselves in the administrative area where they completely destroyed the furniture and equipment. In removing the occupants of the area there were 23 arrests. Six of the occupants and 13 policemen were injured, none seriously. Property loss is estimated to be about \$100,000.

The problem of rehiring of Mr. Bridges could have been readily solved by resort to the regular grievance procedures of the Hospital. These were made available to him and he was assured of back pay if his firing proved unjust. He and his BUF supporters chose instead to demand re-instatement and

attempted to achieve that demand by occupying the administrative area of the Hospital. The reason given for this course of action was racial discrimination in evaluation of Mr. Bridges' work performance. If true, the grievance procedure provides a constructive means of redress. On the other hand, the sit-in was a threat of force and created an atmosphere in which sound interpretation and judgment were exceptionally difficult or impossible. It seemed unwise to accept an imposed settlement when there was ready access to another more effective process such as the grievance procedure.

Patient care was threatened by the occupation of the administrative offices and adjacent major corridor. The effects of the sit-in were many and increased with time. Forced entry into administrative offices placed equipment, facilities, confidential files in jeopardy and made them inaccessible. Counselling services were interrupted. Administrative personnel were dispersed and lost efficiency or function. The time of many staff members and others was consumed in dealing with the occupation and its side effects. The occupation of the administrative area interfered with the normal flow of doctors, secretaries, and technologists between the surgical pathology suite and the tissue processing areas of the pathology department in the Lane building. In several instances, personnel attempting to pass through the corridor were stopped and harrassed by individuals who were sitting-in. Another problem concerned blood banking and the transfusion issue service, both of which are located in the corridor immediately adjacent to the administrative suite. Community Blood Reserve, Inc., a local blood donor recruiting program, was forced to close down. Donors had to be rerouted to the Blood Bank through another door and through the main section of the Clinical Lab in order to reach the Blood Bank. This involved all donors and blood receiving and delivering. Drawing of outpatient blood also had to be done in makeshift arrangement in a small doctor's office in the Clinical Laboratory. The issuance of blood for transfusion was also impaired. Heart transplant patients were denied access to physical therapy through fear of viral or bacterial contamination in the crowded administrative corridor. Passage of patients and hospital personnel was allowed through the guarded administrative corridor but the sight of dozens of people sitting on floor and desks created apprehension and frustration. Toilet, telephone and waiting room facilities adjacent to the administrative area were overloaded while patients, relatives and hospital personnel were dislocated, re-routed and inconvenienced. Certain informational, management and planning activities were disrupted. Personnel were required to be stationed at various hospital locations in order to route visitors and the curious away from the affected areas. The occupation created apprehension among some patients and families. One patient demanded to be released from the hospital and was. In summary, normal hospital functions were disturbed and its capability to respond to patient needs was reduced. Members of the occupying group demanded evidence that patients were actually being harmed before considering that the sit-in was detrimental to patient care. It is unacceptable to allow conditions to deteriorate to this point.

Decision to invoke the trespass law was made only after hours of consultation and review of alternatives. There was no indication that the sit-in would be ended except by the rehiring of Mr. Bridges. That did not seem appropriate under the circumstances. The prospects were that the sit-in would become progressively better organized and entrenched. I recommended that the law enforcement officers of Palo Alto be requested to terminate the sit-in at 6:00 p.m. on April 9. Acting President Miller concurred fully and the necessary steps were taken. It is hoped that the unfortunate consequences of this event will not obscure the path to better understanding of our society and of the methods which we may safely use to effect the long-needed changes in it.

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