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On Behalf Of:

Committee: House Committee On Behavioral Health and Health Care

Measure: HB2697

Thank you once again for hearing our voice. The voice that has been struggling at the bedside for years.

We are here again to discuss nurse to patient ratios.

To set a standard of care that improves outcomes while building and retaining the dwindling healthcare profession.

We are hear today because for years we have been fed the lie that you can do more with less when in reality we are doing less with less. Patient satisfaction and outcomes suffer from this. Increased disease burden and total cost of healthcare. Increased hospital acquired injuries. More medical errors.

Who benefits from this belief- only the corporations who can pocket the savings.

Nurses are leaving the profession faster than they can be trained and hired.

The true reason healthcare remains as functional as it is speaks to the amazing professionals who do the job going above and beyond everyday.

I have worked as a nurse since 2000. The profession I love. After years I am leaving. Why? The impossibility of being able to care for the people in that bed.

As a nurse you are pulled in a variety of ways increasing the margin of error. Error impacts lives.

Missed opportunities to help patients change, find the missing piece, and delivery the quality of care patients deserve.

Nursing has always been a difficult profession that is rewarding when you see patients succeed and return home to their loved ones. The push from corporations to do more with less creates gaps in care. Causing a ripple effect in our healthcare outcomes and what we truly spend on healthcare in America.

What needs to change?

Set staffing ratios. Corporations in California did not go bankrupt from these changes. I know personally as I worked in California during that time.

Safety needs to be at the top of everyone's mind even with the lingering affects of the latest pandemic. When I am caring for your life how many times should I be interrupted? When I am administering your medications how many interruptions?

How many patients are safe to manage at one time?

People being admitted to our hospitals are sicker than 10 years ago. Chronic disease management has allowed this group of patients to be managed in outpatient settings. Where the nurse spends uninterrupted time educating and working with the patient

and their family improving care outcomes at a lower cost.

Time is very valuable. Having a set ratio allows the nurse to manage the cares needed during their shift. Plan for time to educate and teach (a duty that is removed when ratios are high). Assess and search for supplies (has increased with supply chain issues).

Assure medication accuracy and address failing systems (pumps, computers, and scanners) that impact work flow.

Critically think vs. react.

Nurses are often the ones who implement evidence-based practice initiatives at the bedside. One example is nurse driven foley removal. This can cut down on hospital acquired infections, save money, decrease length of stay, and improve outcomes. Created and managed by nurses. When nurses are unable to think due to high patient loads and multiple interruptions it is like asking a pilot to fly blind. They have computer systems to help them, multiple lives under their control, and support staff. We would not even think of this as being a consideration. For years nurses have worked under these conditions with devices developed to help the bedside nurse due to the increasing unsafe situations they work in.

We ask for these changes not only for our profession but for those we serve. Patients are valuable and deserve your consideration in this matter.

Thank you