

MaineHealth

**Testimony of Sharon Baughman, MaineHealth
In Strong Opposition to LD 1639, “Act to Address Unsafe Staffing of Nurses
and Improve Patient Care”
Thursday, May 4, 2023**

Senator Tipping, Representative Roeder, and distinguished members of the Joint Standing Committee on Labor and Housing, I am Sharon Baughman, Chief Nursing Officer for MaineHealth, and I am here today to strongly oppose LD 1639, “Act to Address Unsafe Staffing of Nurses and Improve Patient Care.”

MaineHealth is an integrated non-profit health care system that provides the full continuum of health care services to the residents of eleven counties in Maine and one in New Hampshire. MaineHealth is also the state’s largest private employer with over 22,000 care team members, but, we are facing a workforce crisis that is significantly impacting access to care. We are currently recruiting for over 2,900 positions, in addition to over 55 physicians and 70 advanced practice providers. Of those 2,900 openings, over 800 are nursing positions.

In an effort to address the crisis, we have invested heavily in retaining our current workforce – as a system we have invested over \$75 million in nurse pay increases in the last two years. Our nursing positions are open on average for 71 days despite offering sign-on bonuses, competitive pay, generous relocation benefits, generous employee referral bonuses, and increasing our clinical education support to enable us to provide preceptorships to an increased number of new graduate nurses.

We have also invested heavily in creative and innovative solutions to develop entry-level employees in front line positions from Environmental Services and Certified Nursing Assistant programs to creating pathways into nursing, to training tomorrow’s physicians. As one example, MaineHealth is working with our universities and community colleges to expand their programs and student placements by providing Clinical Nurse Education Faculty to assist in student training. The program started in 2022 and has provided education to 32 separate cohorts, or over 200 nursing students, in all specialty areas, including mental health, obstetrics, geriatrics, and medical practices.

There is no doubt that more needs to be done - the magnitude of the crisis is too big for one organization to solve - but I want to be very clear that the solution to addressing staffing concerns is not a government mandated staffing ratio. There is a nationwide shortage of nurses and it is a false claim that we have nurses sitting on the sidelines in Maine. With only 2% of nurses in Maine unemployed, we need the support of the Legislature to focus on those bills that will develop new nurses as well as supporting our current nurses.

You have heard today that nursing is hard. That cannot be understated. And it has only gotten more difficult during the pandemic – and in its aftermath – with record levels of violence, a behavioral health crisis that is felt acutely in our Emergency Departments, and increased patient volume and acuity. That is why listening to our nurses is so critical to supporting our nursing

team. We have professional practice councils, town halls, nursing forums and unit huddles that are held at the various sites in our system to hear the important voices and concerns of our nurses. Nurses are the backbone of our hospital care teams, and they are part of the solutions we develop to better meet the needs of our patients. As one example, an issue that may affect patient care will be discussed at the daily huddle and rapidly addressed and resolved by the team in the moment versus waiting for management to identify a resolution.

We have also hired travelers to fill our current gaps and ensure patient safety and access. We currently have over 800 travel nurses across the MaineHealth system at an estimated annual cost of approximately \$180 million. That is not a long-term sustainable solution. As a system, we lost \$45 million last year and are on track to lose another the same this year. If this bill were to pass, we would be forced to either hire nearly 400 new nurses – at an estimated financial impact of nearly \$40 million per year at a time when we are experiencing unprecedented losses. Should we have to fill those positions with travel nurses, it will more than double that cost. These mandated additions are neither necessary nor feasible. Should this bill pass, mandated staffing ratios will not support patients – instead, they will ultimately lead to reductions in services and force us to reduce access to care.

Staffing is not always perfect, and the nursing profession is hard. But mandated ratios are not the solution to this issue. Training more nurses and building cultures of inclusion and feedback are. I urge you – don't strip nurses of their autonomy, don't reduce nurses to a number, don't further reduce access to care in our rural areas. Vote no on LD 1639. Thank you and I would be happy to answer any questions you may have.