Senator Tipping and Representative Roeder, Members of the Joint Standing Committee on Labor and Housing,

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My name is Mariah Pfeiffer and I am a Registered Nurse working primarily in labor and delivery for the past 12 years, the last 5 of those here in Maine. In that time, I have worked at the bedside, taught dozens of new nurses both on the unit and in academic settings, and recently earned a public health masters degree. In each setting, I've worked to find solutions for the moral distress that comes from the impossible expectations of our jobs given that our patients are getting sicker and our systems increasingly focus on efficiency, administrative tasks, and documentation instead of patient care. We are working harder and harder and health outcomes are growing worse every year. The status quo is unsustainable for nurses and dangerous for patients.

We need safe staffing ratios so that we can walk into our jobs knowing that we will be able to focus on our patients' needs and not have to compromise our own. While working on the unit, I've had to leave in the middle of assisting families struggling with breastfeeding to help with an emergency happening elsewhere. I've often had to rush through the two-hour recovery period immediately after a birth, the most important time for bonding between a newborn and their parents, so I could run to take care of another patient who just arrived. And I've felt thankful that an emergency happened at change of shift when there were two shifts of nurses available to respond, knowing that a patient's life may have been at risk if it had happened without those extra hands. These are not isolated experiences - we are spread too thin too often, making patients feel alone in some of their most vulnerable moments. This wears on us and it definitely wears on patients.

While not every shift is like this, they happen regularly and unpredictably and the stress from them adds up over the course of a career. We are exhausted. The culture of efficiency and money-saving in healthcare is hurting us all. Hospitals may save money, but patients pay more and receive less care, and nurses continue to suffer.

Educating more nurses can't be the only answer to this problem, nurses are leaving at increasingly alarming rates. I've precepted too many new nurses who have had to take on the care of too many or too acute patients before they're ready, often as a result of short staffing. Increasingly, these new nurses have left the job or the field entirely as a result of this stress and lack of support. This bill helps address one of the root causes of the nursing shortage - the culture of hospitals is inhumane - it is losing us nurses and it is harming patients.

Nurses are the eyes and ears of the healthcare system, but when our attention is too divided and frenzied with taking care of too many patients, it's impossible to notice the subtle changes and early warning signs that matter to the health of each patient. Having safe staffing ratios will let us focus on healing and recovery for our patients while allowing space for our own well-being. It will allow us to work on creating better systems for patient safety and for true holistic care. I want to live and work in a world where this is possible, and I hope you will support safe staffing so we can all work towards a more just and humane culture of healthcare.

Thank you for your work on this committee and for your time and consideration hearing testimony today.

Mariah Pfeiffer, BSN, MPH, RN

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