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## LD 1639 An Act to Address Unsafe Staffing on Nurses and Improve Patient Care

### Testimony in Opposition

May 4, 2023

Northern Light Health  
Acadia Hospital  
AR Gould Hospital  
Beacon Health  
Blue Hill Hospital  
CA Dean Hospital  
Eastern Maine Medical Center  
Home Care & Hospice  
Inland Hospital  
Maine Coast Hospital  
Mayo Hospital  
Mercy Hospital  
Northern Light Health Foundation  
Northern Light Pharmacy  
Sebasticook Valley Hospital

Senator Tipping, Representative Roeder and members of the Committee on Labor and Housing, my name is Daphyne Deane, and I am here today on behalf of Northern Light Mayo Hospital speaking in opposition to this bill.

I am currently the Inpatient Nursing Director at Northern Light Mayo Hospital. Mayo is a 25 bed Critical Access Hospital in Dover-Foxcroft Maine. In my role I am responsible for nursing care provided in our Medical Surgical and Obstetrics Departments. Every day I am accountable for staffing including registered nurses, certified nursing assistants, patient and employee safety and oversight of budget for these departments. Northern Light Mayo Hospital is located in Piscataquis County, one of the most rural impoverished counties with the oldest population in Maine.

I work collaboratively with our nurses to implement patient assignments supporting registered nurse skill and judgement when developing nursing care plans for each patient. Professional nursing care is provided to achieve positive clinical outcomes so our patients can recover and return back to their homes. Our patient care units are staffed by registered nurses and certified nursing assistants working together to ensure that our care is safe and effective.

Rigid and inflexible Nursing to patient staffing ratios does not consider patient acuity. Mayo bases our staffing on the acuity of the individual patient, not a set number of patients. Our nurses may care for more or sometimes less patients based on the needs of the patients. Set staffing ratios at a rural hospital would have a huge negative impact on our hospital and patients in our community. The result would force the patients in our community to have longer wait times in the emergency department as a bed can only become available when the ratio calculation is right. Some may require transfer to another hospital when the only opportunity for admission to our inpatient unit occurs when another patient is discharged. When the emergency department ratios are at capacity ambulances will be diverted, forcing older adults in our communities to experience long ambulance rides to another hospital many miles away, incurring travel costs for families.

The State of Maine is already facing a nursing shortage, rural community hospitals face this challenge continuously. I have been a Nurse manager for over nine years and never been fully staffed, based on our budgeted nursing positions, for more than a couple of months in Obstetrics, Medsurg or Special Care Unit. Therefore, Mayo has adopted

acuity rather than staffing ratios to provide safe, quality care. Mayo could not financially support such a high level of nursing to patient ratios as is discussed in this bill. Mayo currently has 11 nurse vacancies for MedSurg alone and would have to hire at least 7 more nurses to be compliant with the ratios proposed in this bill. Our analysis of the impact of the proposed staffing ratios is a negative impact on our ability to continue to deliver babies at our hospital. Our obstetrical clinical service is at risk should this bill become law.

Thank you for the opportunity to speak in opposition to this bill.