



Maine Hospital Association

MAINE'S LEADING
VOICE FOR HEALTHCARE

TESTIMONY OF THE MAINE HOSPITAL ASSOCIATION

In Support Of

LD 2126 – *An Act Relating to Delegation of Nursing Activities and Tasks to Unlicensed Assistive Personnel by Registered Professional Nurses*

February 8, 2024

Senator Bailey, Representative Perry, and members of the Health Coverage, Insurance and Financial Services Committee, my name is Sally Weiss and I am here on behalf of the Maine Hospital Association. MHA represents Maine's 36 private acute care, psychiatric, and rehabilitation hospitals.

I am here today to express our support for LD 2126. As you all know, healthcare workforce shortages continue to be a challenge across the state of Maine and impact every facet of care. While progress is being made with direct investments in training, recruitment and retention, the growing demand for services from our aging population combined with an aging workforce has resulted in a demand for workers that outstrips supply. I believe this will continue for years to come.

While focusing on factors such as training, recruitment and retention are critical, we must also look at how we can streamline our state regulations to promote a stronger emphasis on skill-based competency, which would permit every healthcare worker to realize the full extent of their education, scope of practice, and training.

For additional context, The National Institute of Health (NIH) defines competencies as “the knowledge, skills, abilities, and behaviors that contribute to individual and organizational performance. Knowledge is information developed or learned through experience, study, or investigation. Skill is the result of repeatedly applying knowledge or ability.”¹ Notice that competency does not focus on certification or credential, but rather knowledge, experience, skills, and ability. I would argue that it's perhaps even more important to focus on competency than credential when thinking about patient safety and quality of care.

¹ National Institutes of Health: <https://hr.nih.gov>

Currently in Maine, nursing delegation of tasks to unlicensed assistive personnel is not allowed. The nurse must complete all tasks, even if some of those tasks could easily be completed by unlicensed assistive personnel, such as an emergency department technician, based on their respective training, experience and most importantly, demonstrated competency.

This bill would allow the Board of Nursing to establish criteria for when a registered nurse could delegate a task to an emergency department technician, for instance. By permitting delegation, we would be freeing up nurses to do more complex tasks within their scope of practice and competency, which in turn would limit burnout and exhaustion, as nurses would have more support from the care team and be able to focus on those aspects of their job that require nursing expertise. Nursing delegation of tasks is not new or unprecedented. In fact, assessing clinical competency and task delegation is a core element of nursing education, and nurses utilize these skills already while working with other healthcare staff, such as Certified Nurse Assistants (CNAs) and Licensed Practical Nurses (LPNs).

In closing, LD 2126 makes our healthcare teams more efficient and effective by using our limited valuable resources to the best of our ability to care for our patients and communities.

Thank you and I'm happy to answer any questions you may have.