Testimony of April Nichols BSN, MLA Quality Improvement Manager, First Atlantic HealthCare

Friday, February 14, 2025 at 10:00 AM

To the Joint Standing Committee on Appropriations and Financial Affairs and the Joint Standing Committee on Health and Human Services

In Opposition to:

LD 210, An Act Making Unified Appropriations and Allocations from the General Fund and Other Funds for the Expenditures of State Government and Changing Certain Provisions of the Law Necessary to the Proper Operations of State Government for the Fiscal Years Ending June 30, 2025, June 30, 2026 and June 30, 2027

Good afternoon, Senator Rotundo, Representative Gattine, Senator Ingwerson, Representative Meyer and distinguished members of the Joint Standing Committees. My name is April Nichols and I serve as the Quality Improvement Manager of First Atlantic Healthcare. I am testifying in opposition to LD 210.

I started my career as a CNA in 80s and have since held the following roles in a Nursing Home: Charge Nurse, Director of Nursing for 10 years and Nursing home Administrator in small privately owned home in Central Maine that closed in 2014. I have served as a nursing home administrator in several Maine homes and as an operator for a large nationwide corporation.

Our company represents 20 nursing and residential care facilities throughout Maine, caring for about 1,400 of our State's frailest citizens. Over the last few years, our First Atlantic group sadly lost three nursing facilities due to Mainecare rates being too low to cover the high cost of labor

LD 210 proposes to strip away annual COLAs that are vitally necessary for both nursing and residential care facilities to provide attractive wages and benefits to our direct care workers. The LD also strips away funding language in the current statute that provides a regional wage adjustment, so direct care rates are adjusted relative to hourly labor rate differences across Maine. Treating all regions in Maine the same ignores the reality of the much higher cost of housing in southern Maine and the higher wage rates needed by employees to live there.

My work in Quality Improvement is dependent on a stable, consistent work force. We in Long term care have been tasked with reducing the use of agency staff and improving our retention of staff. As a quality improvement manager, I would like nothing more than to improve retention which in turn will improve quality of care this will be impossible without COLA adjustments for our current staff to retain them.

We at First Atlantic have initiated several tactics for employee retention but without cost of living adjustments, this will not succeed in retaining a stable work force and quality outcomes for our elders. The following are examples of tactics we are currently using in staff retention.

Tactics:

- Maintaining and investing in competitive compensation.
- Retention budgets to support facility-focused retention plans (such as employee gatherings and events that promote connectivity and community).
- Focused training efforts that support competency and skill development to ensure our employees feel safe in their capabilities to their jobs.
- Hyper focus on high quality on-boarding and introduction to the facility and their jobs.
- Continued elimination of agency staff building continuity in the facility staff and care delivery.
- Investment in upgrading our resident EMR moved to Point Click Care this year; a platform that makes documentation easier and management of patient needs easier to manage given the refined system capabilities and tools.
- Reinvigorating recognition programs employee-of-the-month type efforts.
- Nurse to Resident ratios above state minimums
- Shift huddles for effective and timely communication with facility staff.
- Staff rounding for effective and timely feedback to facility leadership.
- Hand written notes of appreciation from leadership to staff.
- Benefits beyond standard insurance benefits; such as access to discounts on travel, phone plans, shoes for work, etc.
- Paid time off program to support life/work balance and opportunities to renew and refresh!
- Educational opportunities through our on-line education portal.
- Tuition Reimbursement benefits to invest in staff's long term development goals and plans.
- Investing in our Leaders by rejuvenating their in-person education focused on leadership skills that aid the success in their roll and the employee experience.
- Incentive bonuses for recruitment i.e. Refer a Friend to reward staff who help engage new hires
- Recognition bonus for those employees demonstrating excellence
- Engagement of on-call service to provide quick response to staff
- Engagement of Meditelecare to provide mental health resource
- Social media employee spot light for public employee recognition.

Quality Improvement work is important to produce good outcomes for one of our most vulnerable populations. Improved Quality is dependent on processes that are consistent. when there is high turnover rates or agency staffing quality of care suffers. Thank you for your attention, please oppose LD 210. Please support COLA increases to help us stabilize the long term care work force, which in turn will improve quality care in long term care homes.