



Mid Coast Hospital

MaineHealth

May 3, 2023

I am Kristin Anthony, Chief Nursing Officer at Mid Coast Parkview Health in Brunswick. I am writing you to share that as a registered nurse I strongly oppose LD 1639, which mandates rigid nurse to patient ratios.

If you take a look at the title of this bill "An Act to Address Unsafe Staffing of Nurses and Improve Patient Care" you may think this is a "good thing" for nursing and the constituents of the state of Maine. Nothing could be further from the truth. This bill strips nurses of autonomy and flexibility. Mandated ratios reduce nurses to a number, and strip them of the ability to exercise their professional judgement and the flexibility they need to meet the individual needs of their patients.

An excellent example of the necessity of staffing ratios flexibility can be illustrated by the extreme overcrowding we experienced last Friday. The day started with 16 patients who were acutely ill waiting in our Emergency Department. Two of these patients required intensive care level of care. The nursing team rose to the occasion by temporarily modifying our staffing ratios in the ICU to send an experienced intensive care nurse to the emergency department to care for these two critical patients. Staffing ratios would prevent this from happening as we would have been outside of our ratios and incurring a \$10,000 fine in order to provide the best care to patients. The staffing ratio scenario may have prevented those two patients from coming into the department as we were extremely overcrowded and with staffing ratios would have either had to divert them to a hospital with capacity or had the ambulance line up and wait with the patients until the staffing allowed entry.

Our current staffing plan is flexible and is developed to meet the needs of the patients the majority of the time. Some days we have more staff than necessary and low census staff, other days when there is a higher demand we call in additional staff to assist and pull our management team into staffing temporarily. We currently have a system that is not perfect but does not require us to turn patients away.

This law does not create any new nurses. At this time I have 50 open RN positions at Mid Coast. We have engaged in all kinds of creative solutions in order to meet our current staffing needs. These includes the development of a Nursing Extern program to provide nurses in their final year of college an opportunity to expand their skills and prepare for future employment. We have a developed and expanded our nursing residency program. A nursing residency program is a program that combines classroom instruction specific to a nursing specialty with clinical experience under the supervision and guidance of preceptors, coaches, and the program director. We estimate that we would need to hire a minimum of 100 additional RN's beyond our current 50 openings to continue services as they currently stand. We currently have 36 contracted travel nurses. This is not sustainable financially. Due to current cost associated with these travel nurses we are in the process of eliminating many contracts. Currently, MaineHealth has over 1,000 traveling nurses. We lost \$45 million last year and are on track to do the same this year. We're having to make very difficult decisions right now, and this bill could push us over the edge.

This legislation if enacted will decrease access to care. Without an increased supply of nurses, we will be forced to close beds and our Emergency Department may go on diversion, which means we ask ambulances not to bring their patients to our hospital. For these reason and so many more I strongly urge you to oppose LD 1639. Thank you for your attention to this critical issue.

Respectfully,

Kristin Anthony RNC, MSN, NEA-BC
Chief Nursing Officer