

Ascension MI - HB 4550-52- Opposition

The Honorable Julie Rogers, Chairwoman, House Health Policy Committee Members, House Health Policy Committee

November 9, 2023

Dear Chairwoman Rogers and Members,

On behalf of Ascension Michigan, thank you for the opportunity to share our opposition to House Bills 4550, 4551, and 4552, commonly known as the "nurse staffing ratio bills."

As one of the leading non-profit and Catholic health systems in the U.S., Ascension is committed to delivering compassionate, personalized care to all, with special attention to persons living in poverty and those most vulnerable.

Ascension Michigan has 16 hospitals and hundreds of related healthcare facilities that together employ more than 21,000 associates. Across the state, Ascension Michigan provided over \$311 million in community benefit and care of persons living in poverty in FY2022. Serving Michigan for nearly 150 years, Ascension is a faith-based healthcare organization dedicated to transformation through innovation across the continuum of care. Ascension is deeply committed to providing a positive workplace culture for our nurses, as well as other clinicians and associates. Doing so is not only an inherent aspect of valuing the dignity of our colleagues, but a well-functioning and supported workforce improves the quality of care we provide to the communities we serve.

The COVID-19 pandemic exacerbated existing workforce shortages across the country and here in Michigan. According to published reports, the total supply of RNs decreased by over 100,000 in 2021, the greatest drop in supply seen in four decades. Overall demand for RNs is projected to increase by 9%, which is slightly faster than the average growth rate (8%) for all occupations, yet enrollment in entry-level baccalaureate nursing programs only increased by 3.3% in 2021, which is the slowest growth in nursing program enrollment since 2015. This, paired with 91,938 qualified applicants who were denied enrollment, continues to create difficulty for hospitals' staffing levels. Ascension Michigan is actively recruiting clinical providers and we continue to identify ways to work with you and your colleagues to invest in the healthcare workforce pipeline. Currently Ascension Michigan has 787 posted positions for which we are actively recruiting.

While perhaps well intentioned, mandated staffing ratios, if enforced, do not address the underlying workforce shortages and, in fact, are likely to exacerbate them. Limiting the flexibility and independence of nurses to determine staffing needs hampers their ability to provide the best care possible. Nurses play an integral role in the healthcare team in protecting patient safety. However, one size does not fit all - denying the flexibility to tailor staffing based on the acuity of individual patient needs puts safe patient care at risk. Nursing assignments must be adapted to meet diverse patient needs that can change rapidly and are appropriate based on the different levels of experience and expertise of nurses and other members of the care team.

Implementing rigid staffing ratios may have many unintended consequences, including longer wait times in emergency departments and an effective mandate to reduce access to care in order to remain in compliance. In addition, it is likely to result in an increased reliance on temporary nurses to meet these ratios, none of which is conducive to an optimal patient experience.

Mandated nurse staffing ratios will harm Michigan by forcing the closure of 5,100 hospital beds if hospitals can't hire enough nurses to comply with the ratios¹. Simply put, without addressing the root cause of our workforce shortages or providing hospitals with additional resources, we do not have enough RNs within the workforce to staff the ratios mandated within the proposed legislation. The only way to be compliant would be reducing access to care by closing more beds and units in order to move the workforce we do have to fulfill what would be the government mandated ratios within this proposed legislation. The types of units that would see a loss of staffed beds would be those that are critical to patient care, such as medical/surgical, intensive care units (ICUs), emergency departments (EDs), and even some behavioral health units.

Furthermore, our emergency departments, which are already incurring immeasurable resource depletion, will be significantly affected by this legislation. Emergency departments will stagnate across our state. Inpatient and emergency department ratios will lead to a massive increase in wait times to be seen by a provider. People will become further compromised while they wait in waiting rooms and will risk catastrophic events while care is unavailable to them. Our EMS partners will also experience longer wait times to transport and unload their patients at healthcare facilities struggling to comply with rigid ratios. This patient volume is unpredictable and ratios do not afford flexibility to handle EMS volume. Longer handoff times means more EMS units out of service in the community, which will lead to longer 911 response and decrease ambulance availability, further crumbling an already stressed public emergency system.

¹ Protecting Safe Nurse Staffing Flexibilities; MHA Hospital Survey. (2023, July). Michigan Health & Hospital Association. https://www.mha.org/issues-advocacy/key-issues/nursestaffing-ratios/

We respectfully urge you to reconsider the pursuit of legislatively mandated "one-size-fits-all" nurse staffing ratios. We believe that a collaborative approach to safe staffing, determined by experienced nurse leaders on-site at a hospital, that respects the unique needs of our patients and the realities of the on-going workforce shortages, is a far more effective way to support the delivery of quality care.

Thank you for the opportunity to submit written testimony. We are confident that together, we can find solutions that ensure the well-being of both our patients and our dedicated healthcare professionals.

Sincerely,

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