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February 27, 2023

The Honorable Rob Nosse, Chair House Committee on Behavioral Health & Health Care

Delivered electronically via OLIS

Chair Nosse, Members of the Committee:

Part of the magic of healthcare is the amazing team dynamics, specifically in the emergency department. Chair Nosse, I've personally toured you and several of your colleagues through our Emergency Department; and I know you've been to our Psychiatric Medical Center. You know that under current state and federal laws and regulations, we have the ability to flex nurse patient loads up and down depending on patient acuity, workload intensity, and team composition. This helps us stay in compliance with the federal Emergency Medical Treatment and Labor Act (EMTALA) and ensure that all patients who arrive are seen as quickly and safely as possible.

This flexibility is paramount to save lives. A law that dictates ratios subtracts from a nurse's professional autonomy in patient care. It guarantees longer wait times for patients in our lobby and longer ambulance turnaround times. For instance, if I have three patients that are all waiting for their ride home and you arrive with your child who fell and clearly broke their arm, I could easily and safely start seeing your child. However, this law would dictate that you and your child would have to wait until medical transport companies or families to arrive to pick up one of my patients. When there is a mass trauma event, how would we care for those patients and still stay compliant with ratios?

The work of medicine is fluid and personalized to each patient. It requires the ability to absorb large surges in need from our community. HB 2697 will remove our flexibility to absorb these surges and increase the risk of patient and provider harm.

Please do not pass a bill that will harm our communities and reduce access to life-saving care.

Sincerely,

Nancy Bee, RN

Mary Dee RN

Director of Nursing, Emergency Department & Psychiatric Medical Center