June 2023

Joint Committee on Public Health
Senator Julian Cyr, Co-Chair
Massachusetts State House
24 Beacon Street
Room 111
Boston, MA 02133

Representative Marjorie C. Decker, Co-Chair
Massachusetts State House
24 Beacon Street
Room 130
Boston, MA 02133

Dear Senator Cyr, Representative Decker and members of the Joint Committee on Public Health,

The American Nurses Association Massachusetts (ANAMASS) respectfully submits testimony in support of HB2214/SB1467 An Act establishing a commission on quality patient outcomes and professional nursing practice. ANAMASS is the largest voluntary professional nursing organization in Massachusetts, representing over 151,000 registered nurses (RNs) in the Commonwealth and advocating on behalf of their safety and well-being in the workplace.

November 2018, a divisive ballot question, the Initiative Petition for a Law Relative to Patient Safety and Hospital Transparency raised public awareness of nurse staffing in the acute care setting and related ongoing care delivery challenges. Over 70% of the voters of the Commonwealth voted against the ballot initiative. Regrettably, the 2018 ballot initiative resulted in an unintended consequence, a significant divide within the nursing profession in the state. In addition, the COVID-19 pandemic exacerbated demands on the fragile MA healthcare system and nurse staffing, making it even more critical to find a new way to approach nurse staffing. It goes without question that all nurses want to provide safe, high-quality care - the challenge lies in the best way to do so.

This ballot initiative fostered a robust dialogue between nurses, hospitals, and consumers to examine nurse staffing. Nurse staffing has always been challenging to standardize given the innumerable variables that influence staffing decisions. Appropriate nurse staffing is vital to producing optimal patient outcomes, including decreased adverse events, decreased readmissions, and patient satisfaction. However, differences in the amount of care each patient needs, even on the same hospital unit, as well as individual nurse expertise and the need to mentor newer nurses require nurse assignments that may not be equal in the number of patients assigned. This reality demands innovative solutions to care for patients safely and maintain nurse satisfaction with the care provided.

Recent experience in the early days of the COVID-19 pandemic illustrated and highlighted the critical role of nurses in providing life-saving care to the most seriously ill patients. Nurses and healthcare facilities responded to this challenge in various ways, including innovative and flexible ways to match nurse skills with patient needs. For example, one institution in neighboring Connecticut created color-coded teams based on RN experience and credentials. Patients received the needed care and
nurses were able to provide care that best aligned with their expertise. This example demonstrates how collaborative staffing decisions can take into account the numerous variables associated with providing care.

Other methods of matching nurse experience/skills with patient care can achieve the flexibility needed to both care for patients safely and achieve nurse satisfaction with the care they provide. For example, one hospital transitioned from a nurse-patient ratio system to “workload intensity staffing” (staffing based on patient complexity/acuity), recognizing that changes in the amount of care patients require changes from shift to shift and nurse assignments must accommodate those changes to achieve better outcomes for all concerned.\(^4\) Other hospitals use innovative staffing models to adjust short-term changes in care supply and demand, including in-house voluntary nurse float teams who are assigned to work on hospital units needing additional staffing. These nurses receive additional compensation recognizing their ability to care for a variety of patients on many different units and their willingness to assist unit-based nurses where the need is greatest.\(^5\) A Commission, as described in HB2214/SB1467, that includes all stakeholders would be in the best position to examine the variety of staffing systems in hospitals across the country to determine the best way to care for Massachusetts residents and recruit and retain nursing staff.

According to Buerhaus\(^6\), an experienced and recognized nurse workforce researcher, another benefit of a multi-stakeholder working group is to strengthen and, in some cases, reset relationships between healthcare delivery organizations and the nurses they employ. Nurses on the Commission, as proposed in this legislation, can engage with hospital leaders to identify what has worked well, where and how the organization’s culture has supported nurses, what innovations could help adequate staffing, where organizations get in the way of providing patient-centered care, what has been helpful, and what needs to be improved.

All stakeholders have the desire to offer value-based care and achieve optimal patient outcomes. Working together to identify various ways to achieve these goals will be helpful to both institutional leaders and nursing organizations and, optimally, avoid adversarial relationships that benefit no one. Critical to this work is the role of the state legislative and administrative bodies in supporting this process and holding all parties accountable for whatever solutions the Commission recommends and individual institutions promise to employ.

Establishing a Commission on Quality Patient Outcomes and Professional Nursing Practice to examine evidence-based staffing principles and to review and make safe staffing recommendations would be the best way to actualize the Institute of Medicine’s Future of Nursing\(^7\) key recommendations that nurses should practice to the full extent of their education and experience and be full partners in redesigning health care. Nursing care is complex and multifaceted, and the solution is not as simple as increasing the number of nurses. Dynamic and nimble processes and solutions are needed especially considering the current and future nurse shortage.

HB2339/SB1527 would establish a 17-member Commission, chaired by the Secretary of Health and Human Services or designee and include, but not be limited to, nursing organizations (ANAMASS, Massachusetts Nurses Association, Emergency Nurses Association), consumer groups, the Massachusetts Health and Hospital Association, government officials, and others. This commission will
be charged to examine evidence-based nurse staffing standards in hospitals and to review and make recommendations regarding safe staffing practices.

*The first step would be to listen to nurses across the Commonwealth to better understand the challenges they are facing as well as seek comments from the general public and to seek advice from experts in the field.* The benefits of establishing a commission include working together to examine and understand issues of concern for nurses and to provide recommendations and solutions that are agreed upon by all members on behalf of the nursing profession. The goals of this Commission are to improve the overall patient care environment, quality outcomes, and nurse satisfaction. An annual report would be required by the Commission and filed with the Legislature.

HB2339/SB1527 will allow for a variety of key stakeholders to be at the table to continue the discussion on appropriate nurse staffing in hospitals. It is essential this work continues in the best interest of the Commonwealth’s citizens, patients, and nurses. In addition to hospitals, the Commission could also address critical nurse staffing issues that exist in other care settings, including long-term care and psychiatric facilities. Experience has demonstrated that appropriate staffing methods prevent serious illness and save lives. ANAMASS implores you to support HB2339/SB1527.

Thank you for your time and attention to this incredibly important matter.

Respectfully submitted,

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References

2 Massachusetts Question 1 2018 [https://ballotpedia.org/Massachusetts_Question_1,_Nurse-Patient_Assignment_Limits_Initiative_(2018)]


