

February 19, 2022

Honorable Senators,

I am a retired nurse after 41 years at the bedside as a provider of direct care in the Intensive Care Unit. I am now a consumer of such care. I want to share my concerns as you ponder the Nurse Licensure Compact for Minnesota.

The Compact would make a consistent level of quality patient care impossible. My state, Minnesota produces exceptional nurses who meet a high standard of patient care, but the NLC would open the door for lower-skilled nurses, creating confusion for hospital patients who would have no guarantees as to the quality of care they would be receiving. Being a patient in the hospital is a very vulnerable time for most people. You are stripped of your clothes and placed in a bed with various people coming to your bedside with pills, needles and taking all variety of 'specimens'. Clear confidence and trust in your care givers is vital to the healing process.

The Compact would reduce transparency and oversight of healthcare (one of our state's gems - our healthcare reputation). The Compact would take away the power of the Minnesota Legislature and the Minnesota Board of Nursing to set and monitor nursing standards in our state, signing them over to an interstate commission which could set rules affecting our patients and nurses behind closed doors. Under current Nursing Laws 148.211 Licensing subd. 2a. Reciprocity for nurses from bordering states; and 148.212 Temporary Permit provide ample opportunity for nurses to practice in Minnesota under a Minnesota License. This maintains the connection to and confidence in our nurses with the communities they serve.

Again, as a consumer of healthcare and among the aging population, the sense of trust and confidence I would want to have in my caregivers is vital to the healing process. My family's sense of wellbeing is tied to their trust and confidence in those caring for me also. It is very hard to leave someone you love and care for in hands of lesser train personnel.

This bill is really an Outsourcing Care Act. It would hurt rural healthcare access by replacing individualized care by Minnesota nurses at the bedside with computerized healthcare. Tele health. It would outsource decision-making to an interstate commission, cutting off oversight and transparency here in Minnesota. and outsource care from nurses at the bedside in local facilities to computerized corporate healthcare systems outside our communities.

This is a union busting method our current hospital systems would use against the nurses of our state but in the long run would only hurt and diminish the practice of nursing, and thus put our patients and communities at risk. We have sufficient numbers of well skilled and educated nurses in the state. The hospitals have falsely created the current situation by not supporting and protecting our valuable healthcare resource - Nurses. Both Senator Erin Murphy and Representative Liz Olson have authored a bill

which would help to meet some of the needs of healthcare providers for our state. Keeping Nurses at the Bedside Act has been presented in committee in the House. It is a Safe Staffing, nurse retention and funding nursing education bill among others. This would provide new student loan forgiveness program and establish new mental health programs for nurses and other healthcare professionals.

I would like to see my fellow nurses protected and supported in their professional life so when I find myself at their tender mercies, they are able to provide the care I will need. This is true of each one of us and our feeling for our loved ones.

Thank you for your attention and time.

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