

March 6, 2023

*Sent Electronically*

Sen. Melissa Wiklund, chair  
Sen. Paul Utke, ranking minority member  
Sen. Liz Boldon  
Sen. Robert Kupec  
Sen. Kelly Morrison

Sen. Alice Mann, vice chair  
Sen. Jim Abeler  
Sen. John A Hoffman  
Sen. Bill Lieske

To the Senate Health and Human Services Committee:

On behalf of the hospitals and health systems we serve, we write to you with grave concerns about our ability to provide access and care to our patients if the new mandates proposed in SF 1561 are passed. As chief nursing officers (CNOs), dedicated to our patient care mission, we respectfully submit the following comments on SF 1561, strongly opposing any state government mandate that establishes nurse staffing ratios in our hospitals and health systems.

Staffing and caring for patients is about more than just the number of registered nurses (RNs). The entire care team - each of whom brings a necessary skill set in serving patients – is critical to ensuring care, including team members like licensed practical nurses (LPNs), nurses' aides, respiratory therapists, physical therapists, pharmacists, and physicians. Flexibility in assigning the right care team is critical to positive patient outcomes and the capacity to serve community needs at the right time.

This bill calls for the creation of two new hospital committees. The first is an overall staffing committee that would decide hospital and unit RN staffing ratios. Currently, CNOs work with their teams throughout the day to assess patient volumes, patient acuity, and staffing capacity. This bill would move this function to a committee that meets quarterly. The bill also calls for arbitration if the staffing committee does not agree on the staffing plan. If the hospital does not accept the staffing plan approved by a majority of the staffing committee, they may opt to go to arbitration but must implement the staffing ratios from the staffing committee in the meantime.

The second committee mandated in the bill is a "Hospital Nurse Workload Committee" that would create, implement, and maintain dispute resolution procedures to address concerns raised in anonymously submitted safe staffing forms. If these anonymous complaints are not resolved within 30 days, the matter would go to arbitration. This arbitration process would slow down decision making, worsen culture, and add unnecessary expense and bureaucracy.

In addition to inserting an unnecessary committee process into patient care decisions, this bill requires that the commissioner of health create a public grading system of hospitals based on unsafe staffing reports, adherence to staffing plans, etc. This grading system would also include the number of acts of violence against health care workers. While we completely agree that violence in health care settings needs to be addressed with additional focus and state

resources, this grading approach would penalize those hospitals that provide inpatient mental health services to their communities.

We would support some provisions in the bill, including funding mental health services for care teams and expanding loan forgiveness programs for registered nurses. Given that there are more than 40,000 health care job openings in Minnesota, including more than 5,000 RN vacancies in hospitals and health systems, multipronged strategies are needed to address our current workforce challenges. Creating new committees will not attract more individuals into the nursing profession.

There are elements in the violence prevention section of the bill that are good faith efforts at advancing collaboration to improve safety for our employees and patients. Unfortunately, the bill's staffing mandates are untenable for hospitals and health systems and will inevitably hurt our communities by limiting care for patients.

In closing, this bill would have drastic negative consequences to patient care. If implemented, the unnecessary mandates called for in this bill would inevitably lead to unit closures, rising costs, longer wait times for patients, and the loss of vital health care services that communities rely on. Patients would need to be turned away for admission if the hospital did not have capacity due to the constraints forced by its staffing plan. The consequences for a community or patient needing care could be dire. We strongly urge legislators to delete Article 2 of the bill as introduced and focus on the positive and collaborative provisions in the bill.

Thank you for your consideration of our urgent concerns.

Sincerely,

Kelsey Andrews, Director Of Nursing, Windom Area Health

Elaine Arion, Vice President Of Patient Care and Chief Nursing Officer, Ridgeview Medical Center

Deena Aus, Director of Patient Care, Avera Granite Falls

Renee M. Axtman, Vice President of Nursing and Clinical Services, Sanford Health of Northern Minnesota

Diane Bankers, Chief Nursing Officer, Welia Health

Troy R. Batchelor, Director of Nursing, North Shore Health

Maggie Borer, Director of Ambulatory Nursing, Allina Health

Ranita Bothun, Chief Nursing Officer, Appleton Area Health

Nichole Chiabotti, Chief Nursing Officer, Cook Hospital & Care Center

Mandy Dageford, Chief Nursing Officer, Prairiecare Brooklyn Park

Suzie Eklund, Director of Nursing, Stevens Community Medical Center

Val Enter, Chief Nursing Officer, Glencoe Regional Health

Jennifer Erdmann, Director of Clinical Services, Johnson Memorial Health Services

Angie Esbenshade, Interim Chief Nursing Officer, Hennepin Healthcare

Susan Fangel, Vice President and Chief Nursing Officer, M Health Fairview St. John's Hospital

Chelsie Falk, Senior Director, Sanford Wheaton Medical Center

Lynn Flesner, Director of Nursing, Glacial Ridge Health System

Melissa Fradette, Executive Director of System and Chief Nursing Officer, CentraCare

Patricia Frank, Chief Nursing Officer and Chief Operations Officer, CCM Health

Melissa Fritz, Chief Nursing Officer, Park Nicollet Methodist Hospital

Sara Gabrick, Chief Nursing Officer and Chief Operation Officer, Winona Health Services

April Grunhovd, Vice President and Chief Nursing Officer, RiverView Health

Deb Haagenson, Vice President of Patient Care, CHI St. Joseph's Health

Kelly Hagen, Chief Nursing Officer, Rainy Lake Medical Center

Theresa Hannu, Vice President and Chief Nursing Officer, St. Luke's Hospital

Tammy Hayes, Vice President and Chief Nurse Executive/Hospital and LTC Administrator, Northfield Hospital & Clinics

Kelly Hulst, Chief Nursing Officer, LifeCare Medical Center

Janell Hudson, Director of Nursing and Clinical Services, Sanford Thief River Falls Medical Center

Kimberly Jibben, Director of Nursing, Madison Healthcare Services

Margaret Kaline, Chief Nursing Officer, Alomere Health

Maryrose Knutson, Vice President of Patient Care Services and Chief Nursing Officer, CHI St. Gabriel's Health

Tracy Kirby, Vice President of Patient Care Services and Chief Nursing Officer, Allina Health

Carol L. Koppel-Olsen, Vice President of Patient Care Services and Chief Nursing Officer, Abbott Northwestern Hospital

Nicole Lovgren, Director of Nursing, Ortonville Area Health Services

Jennifer Macik, Vice President of Patient Care Services and Chief Nursing Officer, HealthPartners Olivia Hospital & Clinic

Melissa Mcginty-Thompson, Chief Nursing Officer and Co-Administrator, CentraCare - Benson

Corrine Neisess, Vice President of Nursing, Lakewood Health System

Caroline Njau, Senior Vice President of Patient Care and Chief Nursing Officer, Children's Minnesota

Kristin Olson, Director of Nursing and Clinical Services, Sanford Worthington Medical Center

Maribeth Olson, Vice President of Acute Care Nursing Operations, Allina Health

Shauna Paulson, Director of Nursing Inpatient, Sanford Thief River Falls Medical Center

Tom Pint, Chief Nursing Officer, Tri-County Health Care

Gwen Post, Nursing and Clinical Services Consultant, Sanford Health

Lindsey Pyleski, Director of Nursing and Chief Nursing Officer, Sanford Jackson Medical Center

Maria Raines, Vice President and Chief Nursing Officer, M Health Fairview University of Minnesota Medical Center and Masonic Children's Hospital

Molly Reagan, Chief Nursing Officer, North Memorial Health Hospital

Sheryl Remme, Registered Nurse Supervisor, Sanford Health

Jane Sabinske, Director of Nursing, Sanford Westbrook Medical Center

Jeri Schons, Director of Nursing and Clinical Services, Sanford Tracy Medical Center

Jessica Smidt, Chief Nursing Officer, Pipestone County Medical Center

Katie Snow, Chief Nursing Officer, Olmsted Medical Center

Roz Snyder, Chief Clinical Officer, Winona Health Services

Jamie Stolee, Chief Nursing Officer, River's Edge Hospital & Clinic

Melissa Storbeck, Chief Nursing Officer, United Hospital District

Tawnya Sorenson, Director of Nursing and Administrator of Hospital Outpatient Services, Kittson Healthcare

Sonda Tolle, Vice President of Patient Services and Chief Nursing Officer, Perham Health

Casey Uilk, Director of Patient Care Services, Avera Tyler

Wendy Ulferts, Vice President of Patient Care and Chief Nursing Officer, Maple Grove Hospital and North Memorial Health

Jackie Ulseth, Chief Nursing Officer, Mille Lac Health System

Bobbi Jo Vandendriess, Vice President of Patient Care Services and Chief Nursing Officer, Avera Marshall

Monica Vanotterloo, Chief Nursing Officer, Murray County Medical Center

Tori Wagner, Director of Nursing, Mahnomen Health Center

Heather Wasilk, Director of Nursing, Sanford Canby Medical Center

Stacy Weldon, Chief Nursing Officer, Cuyuna Regional Medical Center

Sheila Westfield, Chief Nursing Officer and Director of Nursing and Clinical Services, Sanford

Luverne Medical Center

Kimberly Wolter, Director of Inpatient Services, Gundersen St. Elizabeth's Hospitals and Clinics

Colin Yahnke, Chief Nursing Officer, Ely-Bloomenson Community Hospital

Roberta Young, Chief Nursing Officer and Vice President of Patient Care, Lake Region Healthcare

Carla Zupko, Chief Nursing Officer, Riverwood Healthcare Center