



Testimony of  
Jeanne Wehling, RN  
Lawrence & Memorial Hospital RNs, AFT Local 5049  
In support of HB 5384  
An Act Concerning Reports of Nurse Staffing Levels  
March 5, 2014

Dear Members of the Public Health Committee,

My name is Jeanne Wehling. I am a Registered Nurse at Lawrence and Memorial Hospital. I am writing you today to ask for your support of HB 5384: An Act Concerning Reports of Nurse Staffing Levels. This bill will benefit both the general public and hospital employees.

I have been a med/surg and oncology nurse for 2 years. Previous to earning my RN, I worked at Hospital for Special Care as a LPN for 5.5 years. Before my nursing career started I worked in various positions in Human Services. I enjoy working with people. I chose nursing so I could help people at their worst. Whether it is a new acute situation, a progressive disease process ailing them, or fighting one of the many battles with cancer, or if their time has come and we are there to aid them as they die.

The floor I work on has the capacity for 30 patients at a time. One year the nurse manager took a survey to see how many different diagnoses we cared for. That year, we cared for over 4,000 different diagnoses. This fact alone illustrates how specific our care is, we can't copy and paste care. We have to treat each individual as an individual no matter what brought them to our floor.

One particular shift draws my attention, this night I was assigned to 7 patients. Two patient transfers from another floor (which had to close because of low census). I had those two along with two who were confused and therefore on bed alarms, another was a newly diagnosed cancer patient, and my sixth patient was a post op total knee (who happened to be related to patient number 7). My seventh patient was a comfort measures only patient, a patient at the end of life who is actively dying.

If a bed alarm wasn't going off, there was a call bell ringing, or a family member who wanted to understand the plan ahead for this new diagnosis of cancer. If I wasn't in one of those rooms the room I tried to be in the most that night was my dying patient. Why?? The patient was on a narcotic drip of medication. I was in that room every 30 minutes or more. Giving extra doses of medication so the patient could be as pain free as possible and helping her have a peaceful

death. Every extra minute was spent in that room also caring for the patient's loved one meeting their needs as a patient and also as a loved one. This night was extremely challenging. If it wasn't for my other RNs, LPNs, and PCAs the night wouldn't have been possible.

Information about staffing should be public, it should be available for study and for public scrutiny so nights like the one I experienced are less frequent.

Please support HB 5384, it will help improve patient care, and meet our patient's individual needs.

Thank you for your time.

Sincerely,

Jeanne Wehling, RN  
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