



**TESTIMONY OF
ONE-CT - THE ORGANIZATION OF NURSE EXECUTIVES/CONNECTICUT
A CHAPTER OF THE AMERICAN ORGANIZATION OF NURSE EXECUTIVES
SUBMITTED TO THE PUBLIC HEALTH COMMITTEE
Wednesday, March 5, 2014**

HB 5384, An Act Concerning Reports of Nurse Staffing Levels

The Organization of Nurse Executives in Connecticut (ONE-CT), as the voice of nurses who are leaders, or who aspire to leadership roles in the State of Connecticut, opposes House Bill 5384, *An Act Concerning Reports of Nurse Staffing Levels*. This bill would require hospitals to annually submit to the Department of Public Health reports on prospective nurse staffing plans and quarterly reports of actual daily nurse staffing levels by numerical staff-to-patient ratios for registered nurses, licensed practical nurses, and registered nurses' aides.

ONE-CT opposes this bill as it would have no substantive effect on the continuous delivery of safe, quality care but instead impose a burden which would increase administrative costs. Our hospitals are committed to providing high quality care to achieve optimal patient outcomes; we evaluate outcomes such as patient satisfaction, falls with injury and development of pressure ulcers on a continuous basis. We have spent significant time and resources in partnership with the Connecticut Hospital Association in building high reliability organizations which solidify cultures of safety and the execution of evidence-based practices to prevent these adverse events and ensure the best patient experience. A reporting of ratios that would be mandated by this bill would not at all reflect the dynamic nature of staffing or provide data for improvement. Instead, it is a measure irrelevant to any patient care goal.

As nurse leaders, we have accountability for the provision of safe, high quality effective care in our hospitals. We discuss and develop staffing plans in conjunction with staff nurses serving on our staffing committees. On a regular basis, we review data which might include patient discharges, national staffing benchmarks, staffing satisfaction and patient satisfaction. Additionally, staff information elements, such as licensure, educational background, plus years of experience with the particular patient type are also critical variables to be considered. We do these at both the organization and unit levels on a continuous basis.

We believe that House Bill 5384 will not improve patient outcomes and the public would be better served through the initiatives which may be directed to achieving safe patient care. We urge the public health committee to support those initiatives which will contribute to achieving high quality patient care focused on outcomes.

ONE-CT urges you not to support House Bill 5384, and appreciates your consideration of our position.

For additional information, please contact Catherine Stevens, President, ONE-CT, at 860-224-5011.