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Testimony of
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S.B. 855: An Act Concerning Reports of Nurse Staffing Levels
February 23, 2015

Good Afternoon Senator Gerratana, Representative Ritter and members of the Public Health Committee. My name is Nancy Kapplan and I am employed as an intensive care nurse at UCONN Health Center. Although I am employed by the Health Center I am passionate about the fact that I work for my patients and their families.

I work in a fifteen bed combined ICU. Our patient population is varied and can consist of fresh open hearts, patients with respiratory failure, cancer. The age of our patients can be as young as twenty or well into their nineties. The one thing that they have in common is that they are critically ill and rely on our staff for their basic needs.

In the last year BRG a financial consulting group, has come into the Health Center to stream line costs. The management introduced staffing grids to staff the units. Under this new staffing plan they have eliminated the position of secretary and monitor technician from eleven P.M. to seven A.M. In addition we are only authorized a nursing assistant if our census is ten or more, although this can vary if they don't have enough staff to cover that need. I will tell you that most nights we work without ancillary staff.

Our nursing assignments can consist of two or three patients per nurse. This presents a unique problem as we are instructed to monitor our second patient by pulling their data up on the monitor in the room we are working. The monitors are outdated and the second patient's data obscures most of the data from the primary patient. And, when you have three patients, someone is not being monitored. This practice also distracts the nurse from the focus of caring for the patient she is with.

Our assistant nurse manager or charge nurse is not supposed to have an assignment so they can assist in meeting the demands of the unit. Their additional duties include nursing assistant, monitor tech and secretary. However, the reality is that most frequently the charge nurse also has a two patient assignment and is unable to provide additional assistance to the staff. We had a position for action nurse which allowed for an extra set of hands if the patient status deteriorated. This position was recently eliminated.

As a simple example of how challenging things can be I want to share two recent experiences we had on the unit. I had an obese patient with mental status changes who needed to use the bedpan. It took three nurses to assist her. While these nurses were helping me, four other patients were not being monitored.

That same night we had a respiratory arrest and a cardiac arrest occurring almost simultaneously, requiring medical and nursing staff to prioritize their actions to care for these two patients. The care of the other patients was impacted in both these circumstances.

We frequently fill out unsafe staffing forms that go to management and the staffing committee. There have been no changes noted as a result of these forms. As you can see patient care is impacted, not because of a lack of nursing effort but because of a lack of staff. Turns, mouth care hourly rounds all suffer. So do the staff. We work without meal breaks – unable to leave the floor to go to the bathroom or get a drink. We end our shifts late as charting is often deferred so we can tend to our patient's needs. Our staff have sustained injuries secondary to our current staffing patterns.

I am proud to say I have two sons that are critical care nurses. They worked at a large hospital here in downtown Hartford. They have left bedside nursing because they are unable to provide the quality of care these patients need. I predict our young nurses will walk away from the bedside unless swift and appropriate action is taken.

I have been a nurse for over 34 years and I make a dollar twenty five for each year of experience I have. You can see I did not got into nursing for the money. I went into nursing because I am passionate about the work, about providing the highest level of care to my patients and their families.

Now I ask you to help me by supporting S.B. 855.

Thank You.

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