

Professional Distinction

Personal Dignity

Patient Advocacy

March 12, 2024

Senator Melissa Wiklund, Chair Senate Health and Human Services Committee 95 University Avenue W. St. Paul, MN 55155

Chair Wiklund and Members of the Committee,

As an ER nurse, it is my job to assess, stabilize, and begin treatment. Unsafe inpatient staffing ratios disrupt this process. Sending patients to understaffed floors that cannot safely provide care, betrays the patient, and the work I have done. Patients would be better off in the ER than subjected to such staffing, and I do not make that statement lightly. I need to hand off care so I can have a safe assignment to receive the next patient through my doors. This bottleneck comes from healthcare organizations' failure to adequately staff, and absorb the mandates of EMTALA, not nurses.

Exploitation, neglect, authoritarianism, and vindictive behavior chase nurses from the bedside. There are enough nurses in the community to safely staff hospitals, and ease backups into the ER, but nurses do not want to work for abusive regimes. Hospital management is happy to pit ER nurses against inpatient nurses, when management is at fault. I'm not falling for it, and neither should you. Management abuses nurses, staffing declines, nurse to patient ratios increase, floor nurses are unable to receive new patients from the ER, and the ER backs up. This isn't a nursing problem, it's a management problem.

In response to concerns that this bill will be used to discriminate:

As a lesbian, I do not experience or witness discrimination from my colleagues. I can attest that nurses are open-minded. The sexual orientation of patients is not broached when considering an assignment. Minority status is discussed only when it is apparent a patient fears discrimination. We then discuss how to make them feel comfortable, and treated with dignity, and equality.

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We see the wound that needs dressing, the infection that needs treating, and the life that needs saving. We then see the employer that endangers them, by stretching us too thin, and forcing upon them neglectful levels of under-care by overworked staff with more patients, and interventions than time. Organizations dehumanize patients, not us. Refusing to accept this state of care for patients that deserve better is how we tell the modus operandi of, "all of the profit, none of the responsibility." Enough is enough.

Sincerely,

Jennifer Armbrust, RN Member, Minnesota Nurses Association (MNA)