

MI NURSES Association

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News from the Michigan Nurses Association
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Bipartisan plan aims to make hospitals safer, help RNs provide the best care possible

Legislators want more hospital accountability, transparency on nurse staffing
(Includes quotes from all six sponsoring legislators - three Republicans, three Democrats)

LANSING - Six lawmakers from around the state and both parties today introduced various bills that aim to help RNs provide the best care possible and keep people safe from harm in Michigan's hospitals.

The package, called the Safe Patient Care Act, sets safe limits on the number of patients a registered nurse can be assigned, limits the hours an RN can be forced to work, and requires hospitals to be transparent about their staffing levels.

"Your nurse is your first line of defense in the hospital, but RNs all over the state report that they have less and less time to spend monitoring and taking care of each patient," said **John Armelagos, RN**, president of the Michigan Nurses Association. "A law requiring safe RN staffing levels is urgently needed, considering that patient harm in hospitals is now the third leading cause of death in America. Nurses see every day how without a law, it's the patients who suffer while the industry prospers."

Michigan RNs report consistent understaffing and excessive forced overtime at many hospitals. In independent polling last year, 86% of Michigan RNs said patient care is suffering because they are assigned too many patients and 22% reported awareness of a patient dying because of short staffing.

The strong bipartisan support for the 3-part package, with legislative sponsors from both parties and all parts of Michigan, reflects growing interest in holding the profitable hospital industry accountable for addressing the widespread problem of understaffing and overworking hospital RNs.

Available online: four-page backgrounder, with graphics; one-page "cheat sheet" on the bills and their sponsors: www.misaferhospitals.org.

For the first time, the Safe Patient Care Act consists of three bills with bipartisan support on all bills in each chamber:

- **Safe levels of RN staffing in all Michigan hospitals**
House Bill 4629, sponsored by Rep. **Jon Hoadley** (D-Kalamazoo)
Senate Bill 387, sponsored by Sen. **Rebekah Warren** (D-Ann Arbor)

The bill requires hospitals to follow evidence-based RN-to-patient ratios by unit. (Example: on a medical-surgical floor, the maximum number of patients per RN would be four.) It includes stronger whistleblower protections and requires hospitals to inform patients of the law and how to report violations.

Rep. Hoadley said: "We know that many bad things – including medication errors, infections, falls and even deaths – can happen when hospitals make nurses take care of too many people at once. It's dangerous to let every hospital make up its own rules about nurse staffing levels, as Michigan does. The

Safe Patient Care Act will help RNs provide the best care possible to each patient and protect people from harm in hospitals across the state.”

Sen. Warren said: “I’m pleased to see more legislators on both sides of the aisle recognize that patient safety is not a partisan issue. Michigan needs strong public policy to ensure safe standards at all hospitals and make sure that registered nurses can take care of every patient properly. All of our loved ones deserve the care and attention of a skilled registered nurse in the hospital, no matter where we live.”

- **Limits on forced overtime for RNs**

House Bill 4630, sponsored by Rep. **Stephanie Chang** (D-Detroit)
Senate Bill 388, sponsored by Sen. **Tom Casperson** (R-Escanaba)

The bill prohibits hospitals from forcing RNs to work more than 12 hours in a row (nurses can volunteer, if extended shifts are needed). The law would not apply during public emergencies. Hospitals would have to give nurses 8 hours off after a 12-hour shift. Nurses would have the right to refuse unplanned extended shifts without being disciplined or fired or losing their license.

Rep. Chang said: “I’ve heard far too many horror stories from nurses who are being forced to work 16 or even 20 hours in a row. Many people don’t realize that nurses have no right to say no when they are ordered to stay. Extra-long shifts should be the exception, not the rule. This law will protect patients by making hospitals fix the problem instead of just relying on forcing nurses to work an unsafe number of hours on a regular basis.”

Sen. Casperson, who worked for his family’s log trucking business for years before becoming a legislator, said: “Public safety is the reason we have limits on the hours that truck drivers and pilots can work, and that should apply for hospital nurses, too. I don’t see how hospitals can say it’s acceptable to routinely force nurses to work more than 12 hours at a time. It’s just not good to have someone who is in charge of keeping others alive working when they’re so exhausted they can barely think.”

- **Hospital disclosure of RN-to-patient ratios**

House Bill 4631, sponsored by Rep. **Aaron Miller** (R-Sturgis)
Senate Bill 389, sponsored by Sen. **Joe Hune** (R-Fowlerville)

RN-to-patient ratios are one of the most reliable indicators of patient outcomes. This bill requires them to disclose their actual RN-to-patient ratios to the public.

Rep. Miller said: “People can’t make informed decisions about health care unless they have essential information such as how many patients every nurse has to take care of at a given hospital. Transparency is necessary to get the information that consumers, third-party payers, and policy makers need and deserve. If mandatory ratios are an issue, hospitals shouldn’t have a problem at least making their nurse staffing levels public.”

Sen. Hune said: “It’s sad that it takes a law to force hospitals to share information that should already be available to everyone. The hospital industry remains highly profitable, yet there’s no way for any of us to know exactly what we’re getting for the huge amounts they charge us, our insurance companies or the government. Transparency is imperative when the number of patients per nurse can literally make the difference between life and death.”

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