

House Bill 905- Hospitals - Clinical Staffing Committees and Plans - Establishment

Position: *Oppose*

April 1, 2025

Senate Finance Committee

On behalf of Sinai Hospital and Grace Medical Center, we want to express our respectful opposition of House Bill 905.

Sinai Hospital and Grace Medical Center have well-established processes for determining appropriate staffing levels. Staffing levels are evaluated daily, based on real-time data that accounts for patient census and acuity levels. This ensures that our staffing decisions are driven by actual patient needs rather than fixed mandates, allowing us to always optimize care for our patients. Our staffing models are flexible, adjusting continuously throughout the day to meet changing patient demands, with optimal staffing levels set based on both patient census and acuity. This ensures that we are responsive to fluctuations in patient volume and care complexity. We have a multifaceted approach to ensuring appropriate staffing.

We utilize daily shift huddles as an essential part of our staffing process. These huddles allow frontline team members such as nurses, techs, administrative associates, and other ancillary team members to receive updates about staffing levels, patient needs, and any potential issues affecting care delivery. These huddles also provide an opportunity for team members to offer input on staffing adjustments and workflow changes based on their firsthand knowledge of patient needs. This flexibility ensures that any gaps in staffing or areas of concern can be identified and addressed quickly.

Our staffing process includes proactive monitoring of callouts and absences for clinical staff such as nurses, technicians, and administrative associates. In the morning and afternoon, we conduct a review of staffing needs in anticipation of the oncoming shift, as well as at the start of each shift for further adjustments. This ongoing assessment allows us to continually meet the needs of our patients without being constrained by a fixed, one-size-fits-all staffing mandate.

Staffing levels are not only evaluated at the departmental level but also have visibility from the frontline up to the executive level. We hold a daily safety huddle to review staffing levels across all departments—clinical and ancillary support services, including transport, environmental services, and dietary workers. We utilize a “stoplight” format providing clear, transparent visibility into staffing concerns, allowing for quick realignment of resources, and ensuring that all departments are adequately staffed to meet the current needs of the hospital.

In addition to daily staffing evaluations, we conduct comprehensive monthly and annual reviews of patient volumes, using flexible budget models that allow us to adjust staffing levels based on fluctuating needs across service lines. This review process ensures that we can appropriately scale our workforce to meet patient demand throughout the year. Annual volumes are thoroughly assessed to identify trends and anticipate changes in patient care needs, allowing us to adjust

staffing levels proactively. This review process informs our decisions to add or flex staff across various service lines, ensuring we have the right resources in place to meet shifting patient volumes and acuity levels. These processes are informed by The Joint Commission and Centers for Medicare and Medicaid Services. These organizations establish requirements and national guidelines which prioritize patient safety and positive clinical outcomes.

Sinai Hospital and Grace Medical Center recognizes the importance of engaging our frontline team members in making staffing decisions. A healthy work environment is essential for both patient safety and staff satisfaction. At our facility, we believe that Professional Governance is a cornerstone of creating such an environment. By fostering a culture of empowerment and inclusiveness, we ensure that both clinical and non-clinical team members are supported, heard, and involved in decision-making processes that directly impact their work and patient care. Our professional governance unit-based councils are open forums for all team members' participation and involvement. Through Professional Governance, we create a safe space for all team members to raise concerns without fear of retribution, ensuring that safety is never compromised. This culture of transparency and open communication helps identify potential issues before they escalate and allows us to implement solutions that directly enhance staffing, patient care, team safety, and work environment quality. Decisions, including staffing decisions, are made with the holistic input of those who are doing the actual work, which leads to more effective policies and practices that positively impact patient care, staff satisfaction, and organizational efficiency. This collaborative approach ensures that those directly involved in patient care have a voice in determining appropriate staffing levels.

Hospital staffing plans are reviewed and updated several times a day to account for fluctuating patient volumes, bed availability, individual patient acuity, and the availability and experience of clinical staff. Hospitals need real-time flexibility to respond to and accommodate complex, evolving circumstances. A single, centralized staffing committee lacks the dexterity needed to respond in real time to volume changes and care demands.

Additionally, clinical staffing plans must be developed by clinical team members. These decisions require specific knowledge and expertise to ensure patient safety. While we fully support engaging front line staff in these decisions, clinical staffing should be guided by clinical personnel while non-clinical staff can inform non-clinical staffing.

Sinai Hospital and Grace Medical Center is deeply committed to supporting our workforce and to collaborating on solutions that strengthen our workforce and advance health care in Maryland. We are concerned that HB 905 fails to reflect the complexities of hospital staffing and does not address the root cause of workforce shortages.

For these reasons, we request an *unfavorable* report on HB 905.

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