



Committee: Senate Finance

Bill Number: HB624 Safe Staffing Act

Date: February 18th, 2026

Position: Favorable with Amendments

Dear Bagnall, Vice-Chair Cullions, and members of the Health Committee,

The Maryland Nurses Association urges a **Favorable Report on HB624 with the sponsor's amendments.**

The Maryland Nurses Association celebrates the work of the Joint Commission and the release of their National Performance Goals in January. Our national affiliate, the American Nurses Association, worked with the Joint Commission and we celebrate the safe staffing standards Hospitals will now be required to meet. We believe that The Maryland Safe Staffing Act will help hospitals to create and implement effective plans to meet the requirements set forward by the Joint Commission.

As the frontline workers in a hospital, nurses have valuable insights into how staffing policy should be set in order to improve operations and patient outcomes. A widely cited empirical analysis found that hospitals “where front-line staff nurses held positions on organizational committees with the power to influence institutional policies and decisions” were “significantly less likely to report unfavorable job outcomes and poor ratings of quality and safety.” The analysis also found that “Higher levels of nurse engagement were associated with higher Hospital Consumer Assessment of Healthcare Providers and Systems scores.”¹

SB411 simply requires that each hospital create a committee made up in part of management and in part of frontline staff workers, including nurses. Together this committee makes recommendations for staffing plans. The hospital then reviews this staffing plan, makes changes to it, and submits the final plan to the state. The Maryland Nurses Association considers this to be a reasonable requirement that is likely to benefit our members and everyone in the hospital system. Seeking the input of staff who interface directly with the operations of the business is well understood to improve business operations for both staff and patrons.

The Maryland Nurses Association is not a union, and we represent nurses who are not part of a union. We do not see SB411 as a union bill. In fact, our members who are not part of a union may benefit the most from this legislation because they currently lack any direct negotiating power with the leadership team in hospitals. SB411 gives our members a voice in hospital staffing policy without those members needing to form a union.

¹ <https://pmc.ncbi.nlm.nih.gov/articles/PMC5117656/>

A 2024 report from the Maryland Hospital Association found that Maryland has the longest Emergency Room wait times in the country.² This is despite the fact that according to Becker's Hospital Review, Maryland has fewer per capita Emergency Room visits than 46th other states.³ Incorporating the input of frontline hospital staff, including nurses, will improve staffing policy, quality of life for our members, and patient outcomes.

The Maryland Nurses Association is grateful to the Sponsor for accepting our requested amendment to include a staff Registered Nurse in addition to a hospital room nurse in the staffing committee. With this sponsor amendment the Maryland Nurses Association is in support of HB624.

Respectfully,



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<https://mhaonline.org/wp-content/uploads/2024/05/maryland-general-assembly-hospital-throughput-work-group-final-report---march-2024.pdf>

³ <https://www.beckershospitalreview.com/rankings-and-ratings/ed-visits-per-1000-population-by-state-2/>