



Testimony on HB274/SB387
Task Force on Reducing Emergency Department Wait Times
Position: Favorable with Amendment¹

To Chair Pena-Melnyk and Members of the House Health & Government Operations Committee;
To Chair Griffith and Members of the Senate Finance Committee:

My name is Xandrea Gutierrez. I am a Registered Nurse (RN) working the night shift in an Emergency Department in Maryland and a member of 1199SEIU United Healthcare Workers East, the largest healthcare workers union in the nation. We represent over 10,000 members in Maryland/DC. Our union urges a **favorable** report, with an **amendment**, on HB274/SB387: Task Force on Reducing Emergency Department Wait Times.

The long wait times in our Emergency Department are adversely impacting our patients. Just the other night I admitted a patient who had been waiting for 16 hours, and she had a seizure twenty minutes after being admitted. Had the seizure happened in the waiting room there may have been a worse outcome. In my hospital, on the surface, our wait times are not “that bad,” but that is because so many patients leave the hospital before they can be treated because they are frustrated by waiting for hours to be treated. Another patient of mine left the hospital against medical advice due to the long wait. He ended up having a seizure in the parking lot of the hospital. My coworkers and I had to leave the hospital to search for him in the parking lot.

Sometimes patients who leave our Emergency Department go to other hospitals to seek care. When they go to our “sister” hospital, that patient cannot be admitted until that hospital contacts me to get the patient removed from our system, so there is another step that delays the patient’s ability to receive care. If the patient goes to another hospital not part of our system, they must get their labs and radiology taken again, which further delays treatment for that patient as they now have to wait for results while their whole process starts over again in the new facility.

The short staffing crisis is taking a toll on me and my coworkers and is one of the major factors causing long wait times in our Emergency Department. We are burnt out because there are not enough staff. There should be a

¹Requested Amendment to Line 19: One Registered Nurse employed in an Emergency Department who is a member of an employee organization that is the exclusive bargaining representative of health care workers; and One Service Employee employed in an Emergency Department who is a member of an employee organization that is the exclusive bargaining representative of health care workers.

minimum of 15 RNs per shift, but we rarely reach the double digits of RNs on staff, especially during the night shift. We are dependent on hiring new graduates, but they have a high turnover rate. There is so much talk among management emphasizing new hiring and recruitment, but very little effort to retain seasoned healthcare workers who have been at our hospital for years. Seasoned staff do not feel respected, so morale is down and that has caused a mass exodus of seasoned staff.

Short staffing impacts our ability to triage properly. I am a charge nurse, and when we don't have enough triage nurses, I must be in multiple places at once because I must watch the computer to see when patients are signed in while also doing triage. Me being in multiple places delays triage for those patients which increases their wait time as well as increases the possibility of poor outcomes for those patients. We have a high volume of patients with acuity and a lot of patients from other hospital's Emergency Departments get transferred to us. We don't get any advanced warning about transfers; patients just show up.

Management at my hospital wants to increase the number of patients housed in the Emergency Department, but we are not Intensive Care Unit or Medical Surge nurses so if we increase the number of patients, it will be challenging for them to receive the level of care they need if they are admitted to the ICU. The short staffing crisis is hospital wide and impacts every job classification from RNs to Medical Technicians to Environmental Service Workers. When one department or job classification is short staffed, it impacts every other department and job classification.

Maryland has the longest hospital wait times in the United States. Healthcare workers in short-staffed hospitals are overburdened, and patients deserve to be treated in a timely manner. We healthcare workers are the experts on what is happening inside our Emergency Departments and the solutions we need, so we urge an amendment that will ensure two healthcare workers have seats on the Task Force. Please vote yes on this bill and proposed amendment.

Sincerely,
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