





House Health and Government Operations Committee February 21, 2025

House Bill 905 – Hospitals – Clinical Staffing Committees and Plans – Establishment (Safe Staffing Act of 2025)

## POSITION: SUPPORT WITH AMENDMENT

On behalf of MedChi, The Maryland State Medical Society, the Maryland Chapter of the American College of Emergency Physicians, and the Maryland Section of The American College of Obstetricians and Gynecologists, we submit this letter of support with amendment for House Bill 905.

This bill requires that each hospital establish and maintain a clinical staffing committee with equal membership from management and employees. The committee must develop a clinical staffing plan for the hospital that specifies the appropriate number of clinicians needed to administer quality health care by setting. The plan must be reviewed and updated annually.

It is well-documented that Maryland has the country's longest emergency department (ED) wait times. A major contributing factor is the boarding of patients. The American College of Emergency Physicians defines a boarded patient as "a patient who remains in the emergency department after the patient has been admitted or placed into observation status at the facility, but has not been transferred to an inpatient or observation unit." "Boarding of admitted patients in the ED represents a hospital-wide failure and contributes to lower quality of care, decreased patient safety, reduced timeliness of care, reduced patient satisfaction, an increased number of patients leaving without being seen, and increased mortality."<sup>2</sup>

To address boarding and other issues affecting the availability of health care services, hospitals should have staffing plans, such as required in House Bill 905, that ensure the availability of sufficient health care and support personnel to meet increased patient needs throughout the entire hospital. The above-referenced organizations request an amendment to ensure that a physician who is not a hospital employee or administrator is included on the clinical staffing committee, regardless of whether the hospital is a teaching hospital. With this amendment, we urge a favorable vote.

## For more information call:

Danna L. Kauffman J. Steven Wise Andrew G. Vetter Christine K. Krone 410-244-7000

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<sup>&</sup>lt;sup>1</sup> Policy Statement, *Definition of Boarded Patient*, American College of Emergency Physicians, September 2018, <a href="https://www.acep.org/siteassets/new-pdfs/policy-statements/definition-of-boarded-patient.pdf">https://www.acep.org/siteassets/new-pdfs/policy-statements/definition-of-boarded-patient.pdf</a>

<sup>&</sup>lt;sup>2</sup> Policy Statement, *Boarding of Admitting and Intensive Care Patients in the ED*, February 2023, <a href="https://www.acep.org/siteassets/new-pdfs/policy-statements/boarding-of-admitted-and-intensive-care-patients-in-the-emergency-department.pdf">https://www.acep.org/siteassets/new-pdfs/policy-statements/boarding-of-admitted-and-intensive-care-patients-in-the-emergency-department.pdf</a>