

Marylanders for Patient Rights

Maryland Senate Finance Committee

Bill: Senate Bill 411—Hospitals – Clinical Staffing Committees and Plans – Establishment

Position: Favorable

Organization: Marylanders for Patient Rights, Rockville, Maryland

Hearing Date: February 17, 2026

Chair Beidle, Vice Chair Hayes, and Members of the Senate Finance Committee:

My name is Dr. Brooke Rossheim—I'm a Maryland-licensed physician with training and real-world practice experience in Public Health and Preventive Medicine, Internal Medicine, and Geriatric Medicine. I am board-certified in Public Health and Preventive Medicine and Internal Medicine. I serve as the Senior Medical Advisor for Marylanders for Patient Rights, the largest patient advocacy organization in the state. This testimony is submitted in strong support of SB411.

For many years, Maryland has had the longest Emergency Department (ED) wait times in the nation. Maryland also has the lowest number of patient ED visits per 1,000 population in the U.S. It appears clear that Maryland EDs are not able to handle the current volume of ED patients efficiently. The need for adequate staffing is one of the top issues leading to this situation.

Anecdotally, when in need of emergency care, some Marylanders go to EDs in northern Virginia to avoid predictably long wait times at their local ED. This practice is not optimal, since it leads to more fragmented patient care in a U.S. healthcare system that is already too fragmented.

Long ED wait times are not simply an inconvenience for patients and family members. A 2018 systematic review (see <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0203316>) of overcrowding in the ED showed associations with many negative patient consequences including increased mortality, poor patient outcomes (e.g., patients being seen for chest pain), delayed assessment and care, increased inpatient length of stay, and poor patient satisfaction. ED overcrowding also was associated with increased staff stress and staff non-adherence to best practice patient care guidelines. Prolonged ED wait times also increases the exposure time for a medical error to be made on a patient.

From my perspective as a physician, these are serious issues. For patients presenting with common serious illnesses such as heart attacks and strokes or major trauma from car accidents, time is working against them. The ED care team needs to act quickly and decisively for the patient to have a better chance of survival and recovery.

SB411 provides a well-reasoned approach to hospital staffing. It creates staffing committees at each hospital to ensure that the entire care team is at the table to address hospital-wide challenges in providing safe and timely care. Committees will work together to submit a staffing plan that includes recommendations and staffing data on an annual basis to Maryland Healthcare Commission. The reports will be posted on Maryland Healthcare Commission's website.

SB411 has multiple benefits including:

- Obtaining valuable input from frontline workers about staffing conditions to improve them
- Promoting patient safety and optimal care
- Reducing work-related stress and burnout among hospital staff
- Promoting transparency in Maryland's healthcare system

Marylanders for Patient Rights

This committee has an important opportunity to act on a bill that may literally touch the life of each Marylander. For these reasons, I respectfully encourage the Senate Finance Committee to vote favorably on SB411. Thank you for your consideration of this bill.

Sincerely,

Brooke Rossheim, M.D., M.P.H.
Senior Medical Advisor, Marylanders for Patient Rights
(www.marylandpatientrights.org)