

Jefferson Healthcare supports legislation that ensures we are prioritizing both employee experience as well as patient access and quality of care. This includes participating in the nurse licensure compact, providing additional funding for the Washington State **Preceptorship Incentive** program, developing student loan repayment options, and supporting the implementation of staffing committees.

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Mandating staffing models do not support rural healthcare

Remaining patient centered, partnering with our care teams, and employing flexible and innovative care and staffing models is the recipe for success at Jefferson Healthcare. However, workforce, and especially clinical workforce including nursing, is reaching a crisis level in our State and threatens the long term viability of rural hospitals. We are grateful to the legislature for funding additional nursing slots in 2022, but there is still a long way to go to meet the nurse staffing needs in our state. To meet patient access needs, we rely on flexible staffing models agreed upon with our staffing committee.

Mandated staffing ratios for nurses will limit Jefferson Healthcare's ability to provide high quality, highly accessible care for all of our patients. This mandate will not only impact Jefferson Healthcare patients within our walls, but will severely limit the ability of our care teams to transfer out higher complexity patients to larger health systems. As a small, rural healthcare center, we rely heavily on our partners to take care of more complicated patients we cannot keep here. If larger hospitals systems are forced to decline patient transfers because of nurse to patient staffing ratios, these patients will be left in our facility where we may not have the staff expertise or equipment to adequately care for them.

Additionally, limiting the number of on call hours will have a disproportionate effect on rural hospitals. We cannot employ enough operating room staff to meet a maximum of 60 hours per month for mandatory pre-scheduled on call for the OR team. Although our emergency surgeries make up a small number of our total volume of surgeries, limiting the on-call availability of OR staff will mean we would be forced to limit the hours we accept emergency surgeries here at Jefferson Healthcare. We oppose legislation that limits a rural hospitals innovative, solutions-oriented approach to patient care, such as Senate Bill 5236.

Supporting innovative solutions for flexible staffing models that ensure access to care

Jefferson Healthcare supports legislation that develops a student loan repayment assistance program for hospital-employed nurses; additional funding for the Washington State Nursing Preceptorship Incentive Program; and strengthening Washington's model nurse staffing committee laws. We also support becoming part of the nurse licensure compact with 37 other states to ease out of state nurses who want to work in Washington. Jefferson Healthcare has had incredibly positive experiences with our staffing committee work, and the teams are collaborative, data-driven, and overall highly supportive of both front line nurses and administration. This model, if implemented properly, works to support positive and productive relationships between administration and front line clinical staff to ensure that the focus is on both the patient and the employee experience.