



TESTIMONY OF

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SUBMITTED TO THE PUBLIC HEALTH COMMITTEE

Wednesday, March 17, 2021

SB 1, An Act Equalizing Comprehensive Access to Mental, Behavioral and Physical Health Care in Response to the Pandemic.

Trinity Health Of New England appreciates the opportunity to submit testimony on **SB 1 An Act Equalizing Comprehensive Access to Mental, Behavioral and Physical Health Care in Response to the Pandemic.**

Trinity Health Of New England includes Saint Francis Hospital and Medical Center and Mount Sinai Rehabilitation Hospital in Hartford, Saint Mary's Hospital in Waterbury, Johnson Memorial Hospital in Stafford Springs and Mercy Medical Center in Springfield, Massachusetts. In addition, our ministry includes physician practices, an ambulatory services networks, home health and post-acute services. We are more than 13,000 health care providers committed to providing committed to providing the highest quality care to achieve the best patient outcomes.

This is a sweeping piece of legislation, covering many policy areas, however my testimony is focused on Section 8 of this bill dealing with mandated nurse-patient ratios. As a nurse for over 35 years, this issue has come up numerous times throughout my career. Even now, during a pandemic, I still believe that nursing professionals are those best able to make decisions regarding patient care. Our priority is the delivery of the highest quality patient care to achieve the most optimal patient outcomes. At Trinity Health Of New England, we are actively engaged in building and sustaining a culture of safety and utilizing high reliability and evidence-based practices to ensure the best patient outcomes and experience.

Nurses continuously assess patient care needs in a dynamic environment and consider a wide range of patient and staff specific factors that go beyond numbers and ratios to make staffing decisions. Patient-specific factors include:

- the acuity of a patient's condition,
- age of the patient,
- psychosocial needs
- cognitive and functional ability,
- level of technology needed to sustain life or recovery, and

Staff-specific factors include:

- licensure,
- educational preparation,
- skill level,
- years of experience,
- tenure on the patient unit, and
- level of experience with a specific type of patient care.

These elements are not captured by simply counting the total number of patients and the total number of staff at any level. The bottom line is that mandated ratios disregard the professional judgement of qualified nurses and health professionals and will unnecessarily increase the costs to patients.

I would also like to comment on Section 4 of this bill which calls for the Department of Public Health to study the state's response to the COVID-19 pandemic. Trinity Health Of New England supports this section. As an organization focused on quality outcomes and continuous learning, we understand the importance of a comprehensive review of the response to this pandemic, which we believe will assist all of us in preparing for the next public health emergency.

Thank you for your consideration of our position. Should you have any questions or need additional information, please contact Dan Keenan, Vice President Advocacy and Government Relations, at dkeen@trinity-health.org.