



OPPOSE BURDENSOME, UNWORKABLE HOSPITAL STAFFING BILL Oppose and Vote "NO" on HB 3512

Position: The Illinois Health and Hospital Association, the Association of Safety Net Community Hospitals, and the Illinois Critical Access Hospital Network strongly oppose HB 3512, introduced as a backdoor effort pushed by organized labor to impose unworkable, government-imposed healthcare staffing ratios in Illinois. This proposal would relegate the essential, complex and nuanced protocols established to safely and efficiently staff a hospital 24/7/365, to a series of burdensome forms and onerous paperwork that hospitals would be required to submit to the Illinois Dept. of Public Health (IDPH) to establish minimum staffing standards for every hospital worker, in each hospital unit.

Background: Over the past 20 years, Illinois has enacted multiple laws that in whole or part seek to address staffing in Illinois hospitals and strengthen the voice of direct care nurses. Patient care needs fluctuate—not just shift-to-shift, but oftentimes hour-to-hour. Appropriate staffing requires flexibility to align and deploy workforce in the most appropriate way to meet the unique, dynamic and very diverse needs of a specific patient population, relying on the clinical expertise of nursing staff and the actual medical needs of patients.

Kev Concerns:

HB 3512 requires IDPH to issue minimum staffing standards for every person working in or at a hospital, including contractors and subcontractors, regardless of whether or not they provide patient care. Notably:

- Requires IDPH to create and maintain <u>a publicly available registry</u> comprised of all "competent employees" that includes <u>their name</u>, <u>address</u>, <u>contact information</u>, <u>and current employer</u>. Healthcare workers are being physically, verbally, and emotionally abused and assaulted at alarming rates. It is unconscionable to suggest their names, addresses, and contact information appear on a public list.
- Allows non-hospital employees with no understanding of hospital staffing processes or protocols to serve on a Safety Review Panel and emboldens them to resolve employee disputes.
- Imposes a 0.1% per day penalty for violations based on the hospital's annual revenue during the most recent fiscal year.

House Bill 3512 represents a government takeover of healthcare that establishes costly, unnecessary and punitively bureaucratic requirements that will not improve quality of patient care or translate into better patient outcomes. Nurses and hospitals must work together to establish an appropriate staffing plan for that particular day, in that particular unit—not a state government agency that is neither designed nor equipped to make decisions regarding hospital staffing. Placing sensitive healthcare staffing decisions in the hands of a government entity will prompt costly class-action litigation throughout the state, driven by hospitals unable to meet these government-established ratios.

HB 3512 would severely restrict the ability of nurses and local hospitals to meet the wide variety of rapidly evolving patient care needs that are unique to their community. As a result, HB 3512 will drive bed and unit closures, service reductions and layoffs, and potential hospital closures, particularly at the Safety Net and Critical Access Hospitals that care for Illinois' most vulnerable communities.

OPPOSE AND VOTE "NO" ON HB 3512