

Testimony of Debbie White, RN

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Before the U.S. Senate Committee on Health, Education, Labor and Pensions Hearing: ‘Overworked and Undervalued: Is the Severe Hospital Staffing Crisis Endangering the Well-Being of Patients and Nurses?’

Friday, October 27, 2023

Good morning,

Thank you, Chairman Sanders, for organizing this crucial hearing. I am Debbie White; I have been a nurse for 35 years. I am also president of the Health Professionals and Allied Employees, which is the largest healthcare union in New Jersey, representing 14,000 healthcare professionals across the state. I am also a vice president of the American Federation of Teachers.

HPAE is an affiliate of the AFT, the fastest-growing healthcare union in the country and second to our sister union, National Nurses United, in the number of nurses represented. AFT President Randi Weingarten sends her greetings and thanks you on behalf of the AFT’s 200,000 healthcare professionals.

Over the past few months, HPAE has stood with our heroes, the United Steelworker nurses of Robert Wood Johnson University Hospital, because we know that the experiences of those on this panel are also the stories of HPAE nurses throughout New Jersey and nationwide. As an AFT vice president, I have talked in detail to my colleagues across the country and have heard the same stories in Alaska, Connecticut, Montana, Ohio, Oregon, Pennsylvania and others.

Healthcare is in crisis. Not simply because of the pandemic, although that was the proverbial straw that broke the camel’s back. No, it goes much further back to the corporatization of healthcare. In other words, healthcare corporations have become big business, and the goal of big business is to make a profit.

Whether for-profit or nonprofit, hospitals are all in the business of making money. And in New Jersey, most of our hospitals have made tremendous profits—even during the pandemic. One would think the primary focus for spending those profits would be staffing. Instead—and this has gone on for decades—nursing care, in fact all bedside care, is a line item in a budget cut to its lowest number to maximize profits. Hospital management, and the corporations that run hospitals, are too often focused on adding a new fountain in the lobby or paying for glossy advertisements instead of building up staff. They also spend millions on anti-union firms and lobbying efforts against safe staffing laws. Nurses know what safe staffing looks like, because they live it. But pleas for more staff go unmet because, and I’m quoting, “it’s not in the budget.”

Nurses and all healthcare workers were burned out and stressed out *prior to the pandemic*. Thus, when they were met with the deadly and horrific working conditions during and after the pandemic, they left hospitals in droves.

Last year HPAE contracted with Change Research to survey nurses in New Jersey who work in hospitals, and here is what we found:

- 30 percent are no longer hospital bedside nurses.
- Of the 70 percent who remain in our hospitals, 72 percent have recently considered leaving.
- And most troubling, of those with 0-5 years' experience, 95 percent report that they are likely to leave.

The No. 1 reason nurses leave is poor staffing. The second reason is burnout and stress, also mostly due to poor staffing.

I would assert that understaffing has driven our healthcare system to the brink of collapse. Frontline healthcare workers are leaving the bedside at an alarming rate because of untenable working conditions. In the HPAE 2022 survey:

- 83 percent of nurses said staffing levels put their license at risk.
- 77 percent said quality of care is getting progressively worse.

Every patient, every citizen, every legislator should be alarmed at these statistics.

So along with many other AFT affiliates and other healthcare unions, we decided to put our primary focus on this staffing crisis. The AFT staffing campaign is called Code Red and has resulted in legislation in Connecticut and Oregon, among other states. Legislation in Pennsylvania, which mirrors the Oregon law and was championed by the Pennsylvania Association of Staff Nurses and Allied Professionals and the Service Employees International Union, has passed through the House and is making its way through the Senate. Healthcare unions are leading the way. We want to be next in New Jersey.

Why? Because we cannot retain nurses, and they will continue to migrate out of hospitals because staffing is poor. We do need to recruit into the profession, of course. But without addressing retention (that is, stopping the migration out of our hospitals), it's as if we are trying to fill a bucket full of holes with water. Without addressing the reasons for the migration, we will never stem the tide.

By now, we've all heard "Safe staffing saves lives." It is the mantra of every nurse in the country. But it is also truth. We have 20 years' worth of data, since California adopted a safe staffing law, that shows the benefits of adequate nurse-to-patient ratios. The data is clear: The

staffing law in California decreased patient deaths; decreased negative outcomes for patients, like hospital-acquired infections, bed sores and medical errors; decreased injuries for nurses and patients; increased retention of nurses (saving hospitals millions in orientations); and was cost-effective for hospitals.

However, we have seen that hospitals will not be good actors on their own and agree to ratios—as you can see by the willingness of Robert Wood Johnson University Hospital to spend millions to refuse to settle this contract with its nurses. It has advertised the millions it has spent fighting the people it has referred to as “healthcare heroes.” The hospital should be ashamed to reveal this to the public. But it does highlight the lengths our healthcare corporations are willing to go to fight against safe staffing. It also highlights why we need staffing laws.

Lobbying groups for corporations that own hospitals—both for-profit and nonprofit—continue to work hard to beat back legislative solutions to the staffing crisis. Lobbyist groups like the American Hospital Association and the New Jersey Hospital Association, as well as the hospitals themselves, spend millions in profits to fight back against safe staffing bills. It is the healthcare unions (that is, the frontline healthcare workers) across the country that are speaking up for nurses. And when we speak up for nurses, we speak up for patients.

We need laws to force hospitals and other healthcare institutions to staff safely. This strike is a test case for all hospitals. In my opinion, Robert Wood Johnson has failed the test. Ultimately, we can avoid more strikes like this one by passing legislation that mandates safe staffing. It is why HPAE, the Steelworker Union nurses, and every New Jersey union have been pushing the state Legislature to pass NJ-S304 in Trenton to mandate enforceable staffing ratios. It is the solution.

We are encouraged by the success of other states. We are encouraged by the crowd in this room. Chairman, with your help we will be able to say first California, then Oregon, now New Jersey.

Thank you, sir.