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Position Statement of the Wisconsin Organization of Nurse Executives
Senate Bill 512
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The Wisconsin Organization of Nurse Executives (WONE) represents over 250 nurse administrators, managers and faculty members of Wisconsin's hospitals, health care agencies and schools of nursing. The WONE opposes Senate Bill 512 because health care agencies currently maintain effective supplemental staffing resources and rarely utilize mandatory overtime (MOT) and this bill does not support the (2004) Institute of Medicine's Recommendations for Transforming the Work Environment of Nurses.

It is further noted that at this time, Wisconsin is not experiencing an acute shortage of nurses as compared to other regions of the country. Nurse leaders from various organizations have created partnerships with schools, workforce development boards and agencies to continually expand nursing's workforce in the state. Over 30 schools of nursing provide over 2000 graduates yearly to Wisconsin's health care agencies. Two additional schools of nursing are also projected to open, further increasing the number of new graduates in the state. Since 2004, Wisconsin uniquely offers the Nurse Residency Program to hospitals state wide through a federally funded program administered by Marquette University. Key success factors contributing to new graduates' socialization and retention have been implemented in many Wisconsin hospitals. Through these initiatives, Wisconsin has experienced considerable growth both in the number of new graduates and in our ability to retain them.

Health care agencies have also diligently developed several options to access supplemental staff when needs arise. Supplemental float nurses, joint appointed staff, and other flex staff have been expanded over the years, providing agencies various options when increased levels of staffing are required. Specially trained nurses are also available who can care for a variety of patients, maintaining competency in multiple specialty areas. It is also noted computerized scheduling systems are being implemented or expanded in several Wisconsin hospitals. These applications greatly enhance the agency's ability to fill open shifts well in advance of needs.

Given the above, mandatory overtime is never a first, or even a second strategy for staffing. Senate Bill 512 is a "one-size-fits-all" approach to hospital staffing and it does not reflect the fact, which is born out by studies that mandatory overtime rarely occurs. A WHA study of nurses done with other organizations and the Wisconsin Department of Workforce Development indicates that only 7.8% of RNs had ever experienced mandatory overtime. That being said, the need for healthcare is unpredictable and hospitals must be able to respond to patient needs around the clock every day of the year. Limiting the tools available to hospitals impairs their ability to insure that the correct number of staff are available whenever and wherever the need. SB 512 is one



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of those factors that would limit the options available to healthcare facilities as they struggle to staff for unpredictable patient care demands. It is not possible to simply not care for patients. Their safety is compromised when sufficient staffing is unavailable. While a last resort of many existing ways to manage patient care needs, mandatory overtime should remain a tool to be used in times of extreme circumstances.

Recently the WONE has extensively reviewed the concepts of scheduling practices and fatigue factors for nurses. Through a review of current research, many factors have been identified to contribute to nurses' fatigue. Factors such as presence of rest periods during a shift, the scope of the assignment, number of hours worked, the acuity of patients, personal lifestyle issues, the time off between scheduled shifts and other factors all contribute to fatigue. Furthermore the Institute of Medicine recommends a variety of factors be addressed to transform current work environments. WONE remains committed to expanding its membership's awareness of current research in this area and encourages each organization to examine current scheduling practices. It must be said that as part of the above analysis of fatigue and length of work shift, if mandatory overtime is bad, then it should follow that voluntary overtime is equally harmful. SB 512 is silent on the use of voluntary overtime and is a disingenuous solution to the issue.

As noted above, proactive approaches to the issues surrounding adequate staffing are being pursued. Health care facilities, academia and other stakeholders continue to address the nursing workforce shortage. A number of additional initiative have been put into place so that supplemental staff are available when the need arises. WONE also continues to address worker fatigue and other work environment issues. Mandatory overtime is the last of many strategies to assure that sufficient staffing is always available and that our patients remain safe and receive optimal care. The members of WONE appreciate the opportunity to respond to the proposed legislation found in Senate Bill 512.

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WONE President

References

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