

January 25, 2022

TO: Rep. Michael Marcotte, Chair, House Commerce and Economic Development
FROM: Rep. Mari Cordes, RN
SUBJECT: Nursing Workforce

The nursing shortage is at a crisis point because of decades long devaluation of nurses - the legacy of altruism as a false premise that nurses are happy to be undervalued when it comes to compensation because we're kind, altruistic, heroes, and tough (or meek depending on the era). Health care systems came to tend more toward economic ventures than patient centered communities. Because of these issues, the nursing workforce went into the pandemic already short staffed, demoralized and tired. Nurse educators are also poorly compensated and can make more in other nursing jobs, creating an educator shortage and a backlog of nursing students. Finally, the nursing workforce problem is much larger than free tuition and tax credits can fix.

Recommendations for Nursing Workforce challenges: Raise workplace standards

1. Legislature: Establish minimum requirements for wages and benefits such as earned time off as permitted by Federal Labor Law.
2. Legislature: Require this year a retroactive (to xxx date) pay increase of all nursing personnel* and nurse educators of a minimum 10-15% across the board while maintaining all collective bargaining and union rights where applicable
 - a. Work with stakeholders including
 1. Vermont unions representing healthcare workers
 2. Vermont chapter of American Nurses Association
 3. Vermont Nurse Practitioners Association
 4. Pt representatives, AARP, patient advocacy groups
3. Legislature: Require increase in earned time off benefits, and minimum standards
4. Legislature/hospitals: Create a Baylor type program for LNAs to bridge to RNs with work schedule where LNAs work two 12 hour shifts on weekends but get full-time pay and benefits. Require a 2 year work commitment as an RN. This type of program benefits parents and working people and enables them to attain RN faster. Creates incentive for LNA retention. Costs less to orient/onboard LNAs who become RNs.
5. Legislature, GMCB: Require transparency of hospital executive pay in real time, not 990 reporting (Rep. Rogers' bill) especially for use during hospital budget review. Have nursing representation on GMCB
6. Legislature, GMCB: Create a direct relationship between increased hospital executive compensation/bonuses and employee compensation. Begin to close the gap between executive pay and the pay of front line workers. Require approval for more hospital executive positions, using nurse staffing data as a primary measure.

Other

1. Free tuition, scholarships and tuition reimbursement are helpful but alone will not solve the problem.
2. Tax credits (governor proposed \$1,000) and incentivizing retired nurses to return to work will not be effective in recruiting and retaining nurses.
3. Childcare at hospitals and other facilities, including longer hours of childcare for those who work 12 hr shifts.
4. Allow nurses to pay into the State Employees Pension fund. As long as they are working in VT as an RN or APRN they would qualify for a pension. LNAs could qualify at a lower rate.

*Nursing personnel: Non-management positions, Licensed nursing assistants, RNs (AD and BS), APRNs/NPs, Nurse Educators, Nurse Clinicians, etc.

Respectfully submitted,

Rep. Mari Cordes, RN
mcordes@leg.state.vt.us
802.989.9267