

**S.277 An act relating to prohibiting mandatory overtime for nurses**  
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My name is Lisa Gerlach, I serve as the lead Political Organizer for AFT Vermont, our state's largest healthcare and higher education union. We represent 12,000 workers, including healthcare workers at UVM Medical Center, Porter Hospital, Central Vermont Medical Center, and Brattleboro Memorial Hospital.

As you know, one of the functions of a labor union is negotiating contracts with employers that help improve the working conditions for union members, including health and safety conditions. Mandatory overtime is no exception to this. When nurses and other healthcare professionals are forced to work mandatory overtime, it is dangerous not only for the workers, but for the patients that they are caring for. Because our members recognize this, they have negotiated prohibitions on mandatory overtime except in emergency situations into their nursing union contracts. These contracts are an agreement between the workers and the employers, so I don't think it's a stretch to say that this shows that the hospital administrations recognize the dangers of mandatory overtime as well.

Down in Middlebury, the Porter Federation of Nurses and Health Professionals RN contract includes the following language:

"There shall be no mandatory overtime except when PMC determines that there is an emergency situation where the safety of the patient requires its use and when there is no reasonable alternative.

[PFNHP RN Contract](#), Section 203

At UVM Medical Center in Burlington and Central Vermont Medical Center in Berlin, the RN Contracts include this simple language:

"There shall be no mandatory overtime except in an emergency"

Article 19, [CVHU](#) and [VFNHP](#)

And in Brattleboro, the Brattleboro Federation of Nurses contract states:

"There shall be no mandatory overtime except in an acute, unanticipated and emergent change in staffing, volume, and or/acuity"

BFN Contract, Article 10 Section 3

Our workers have enjoyed and benefited from these protections that they won at the bargaining table, but strengthening these protections and codifying them into state statute would ensure that nurses and patients around the state, regardless of their union affiliation, would benefit from them as well.

What are the dangers of mandatory overtime? The effects have been well studied. To be brief: nurses who regularly work shifts longer than 12 hours without adequate time off in between are FAR more likely to burn out and leave their jobs. Mandatory overtime is strongly linked to a reduction in quality of care and is “specifically linked to patient mortality and hospital-acquired conditions, including pressure ulcers, falls, central line-associated bloodstream infections, and catheter-associated urinary tract infections.” ([source](#)) Like I said: it’s harmful to both workers and patients.

I also want to point out that 18 other states ban or severely limit mandatory overtime for nurses, including our neighbor New Hampshire, which caps maximum shifts at 12 hours with a mandatory 8 hours off after 12 hour shifts, and New York.

It’s true that we have a nursing shortage in this state, but the answer is not to put nurses and patients in danger through chronic mandatory overtime practices. While these practices may help in the short term during emergencies, long term mandatory overtime actually exacerbates the problem by increasing the rate at which nurses burn out and leave their field.

Resources:

<https://pmc.ncbi.nlm.nih.gov/articles/PMC11091319/#s1>

<https://nursejournal.org/resources/mandatory-overtime-for-nurses/>