



DISTRICT OF COLUMBIA NURSES ASSOCIATION

United Medical Center Oversight Hearing

TESTIMONY, February 5, 2019

My name is Roberta F. LeNoir and I am an Emergency Room nurse at United Medical Center (UMC) in Southeast, Washington DC. I am the president of the District Columbia Nurses Association (DCNA)/UMC unit. I have been a nurse at UMC for over thirty (30) years. I have been committed to providing quality care to the residents who live in Wards 7 and 8. I represent over 250 nurses at UMC who also care deeply for the patients we serve and who are also committed to providing quality care.

I would note that DCNA's relationship has improved with this management as the CEO has been trying to work with DCNA and listen to some of our concerns. This is very different from the prior management who disregarded our concerns and safety of the patients and disrespected us as professionals.

However, I am here because of the concerns of staffing at the hospital. Nurses have expressed to me and DCNA frustrations with staffing. Safe patient ratios impact quality of care. The nurses are overwhelmed and do not have the ability to give all of the patients the attention required. Unsafe ratios have been associated with a number of negative patient outcomes, such as higher surgical mortality and higher complication rates due to errors. Nurses do not have ancillary staff to assist them and have to service many patients with high acuity levels all at once. Nurses are just providing survival care at UMC. Nurses at one time were able to provide patients with constant monitoring, education, research and provide the attention to ensure the comfort and satisfaction of the patient. Nurses were able to take the time to educate their patient and work with the patients to improve their care. I am an Emergency Room nurse at UMC and I personally often have to provide care to multiple patients at once without techs or any assistive staff. Improved ratios will only benefit the hospital in retaining nurses and avoiding nurse burnout.

I am also appealing to this committee to ask you not to forget the nurses in the new hospital in the East of the River. I have worked in almost every unit at UMC including ICU, telemetry, recovery and Emergency Room. Nurses at UMC like myself have labored to help UMC reach the success of providing care to residents of Wards 7 and 8 at the most difficult period when UMC was experiencing financial hardship and bankruptcies. We continued our care when linens, pharmaceutical, food, staffing and technological support vendors pulled out during the bankruptcies. We continued our care when environmental conditions were poor and heating and air conditioning units failed and could not be repaired. We continued our care with inadequate equipment, insufficient staffing, no support staff and more. We have endured the most difficult times at UMC, including the consistent changes in management which often frustrated the nurses because of the lack of consistency. We have proven our commitment to your community and should not be forgotten as the District moves forward with the new hospital to service the East of the River.

As we have dedicated our efforts and time to you and your community, we request that you ensure that the employment of the nurses from UMC are smoothly transitioned to East End Hospital with the same pay, seniority and benefits; and that East End Hospital maintains the Collective Bargaining Agreements for the employees and that the operator of the East End Hospital bargains in good faith with the unions representing the transitioned employees. My colleagues and I have dedicated our service to your community and I look forward to continuing to serve you.

As the president of this Unit, I ask you to provide more oversight over UMC and incentivize hospital administrators to ensure that there are safe patient ratios. Nurses have come to me complaining about the unsafe ratios at UMC. DCNA and the UMC nurses are dedicated to quality patient care and successful patient outcomes and we ask for your assistance to guarantee quality care at UMC.

Respectfully submitted,

Roberta F. LeNoir, RN