

Jen Mizell, RN in UPMC UTS – Testimony for Legislative Hearing
State Capitol, Irvis Office Building Room 523
May 7, 2024, 9:45 am

Note: Wear scrubs.

Hello and thank you to all the committee members. My name is Jennifer Mizell and I've been a registered nurse at UPMC for almost two decades.

I became a nurse because I wanted to make a real difference in people's lives. That's what has kept me going all these years, especially through the trauma of the pandemic.

But as UPMC has consolidated more and more power, staffing levels have been eroded and treatment of nurses has worsened, making it increasingly difficult to deliver the safe care our patients deserve.

For close to two years now, I've been part of UPMC's travel staffing program. This experience has given me an overview of the severe challenges nurses are facing throughout the UPMC system.

Currently I'm assigned to the post-anesthesia care unit at Carlisle. In one of the most troubling examples of understaffing that I've experienced, UPMC does not consistently follow the staffing guidelines set up by the American Society of PeriAnesthesia Nurses.

Those guidelines specify that recovery room nurses should each have only one to two patients who have just come out of surgery and that there should always be at least two registered nurses in the room. That's because patients coming out of surgery are incredibly vulnerable and need a high level of personal attention.

But there are facilities I've worked at within the UPMC system, including Carlisle, where at times recovery room nurses are each responsible for three patients who just came out of surgery, contrary to the ASPAN staffing guidelines. On weekends and in the evenings, some UPMC facilities where I've worked often have only one nurse in the recovery room, despite the ASPAN guidelines stating there should be two nurses present at all times.

When there's only one nurse, if a patient goes into cardiac arrest or can't breathe, we have no backup. There's a saying in healthcare that "Time is brain, time is heart". Every second counts to save a patient's life. When you're alone, you're faced with an excruciating choice: do I start CPR, or get the crash cart with defibrillators, or get help.

You can't do all three at once.

On top of the extreme understaffing and exhaustion, UPMC executives recently [cut internal travel nurses' pay](#) by \$13 an hour. We signed up for the traveler program and made deep personal sacrifices, including time away from our children, to help UPMC. Our hospitals are still dealing with the effects of the pandemic, turnover, burnout and nurse shortages. Our patients are sicker and need more care than ever.

The hospital industry is [calling on the state government](#) to bring more nurses to the bedside. But instead of solving this crisis, UPMC executives are doing the exact opposite and driving nurses away.

We need elected officials to stand by our side, hold UPMC and other big health systems accountable, and ensure safe, quality care for the people of our Commonwealth.

Thank you.