



Good Morning members of the Whiting Task Force. My name is Chris Fontaine and I am a Registered Nurse at WFH and have been working there for three years. Before that I worked as an RN for the Department of Corrections. I come before you today to discuss critical issues with staffing at WFH and how it impacts patient care.

It seems to me that WFH's approach to staffing is always to run their facilities at the bare minimum. This creates strain amongst the staff, which becomes particularly acute during common vacation months. Staff go on vacation, reducing the pool of staff WFH has to staff all their units, and then all it takes is one or two call outs for the staffing levels to become particularly problematic.

For instance, patients are entitled to four opportunities to go outside everyday, two opportunities during first shift and two during second. On a low staffing day, we may not have enough staff to take patients outside. This may aggravate patients, which might then trigger a situation in which those patients behavior deteriorates and require one to one attention from staff to deescalate the situation. At this point we are running low on staff and now have several acute patients requiring one to one attention. This is just one example of how low staffing can create a chain reaction of negative outcomes.

Another problematic staffing trend at WFH is to utilize LPNs on units when we are short on RNs for a shift. Ideally each unit should have two RNs, however, this often isn't the case, and WFH will utilize their LPNs. Currently, Dutcher building is down at least 20 Registered Nurses. As an RN who has worked with LPNs for a long time, I have the utmost respect for LPNs and the work they do. With that said an LPN is not licensed to do the assessments and other tasks that an RN is, and management's practice of using LPN's when we're short nurses restricts the staff's capacity to handle different situations effectively. If a task must be done that an LPN is not licensed to carry out they then must wait for an RN to be available. When this happens in multiple units at the same time the need for more RNs becomes critical and the quality of patient care suffers.

It is a disservice to the patients to not staff the units at WFH properly. Short staffing creates strain amongst staff, inhibits staff's ability to quickly respond to patients needs, and prevents staff from allowing patients to engage in activities like outdoor time. These are just a few examples of how short staffing negatively impacts patient care. WFH must hire more staff to bring staffing up to an appropriate level in order to ensure that patients are receiving the quality care they deserve.