

BY adding to

Article – Health Occupations

Section 8-7B-01 to be under the new subtitle “Subtitle 7B. Statewide Commission on the Crisis in Nursing”

Annotated Code of Maryland

(1994 Replacement Volume and 1999 Supplement)

Preamble

WHEREAS, In Maryland, and across the country, concerns about an increasing nursing shortage continue to grow; and

WHEREAS, A number of factors contribute to the growing shortages in qualified nursing personnel; and

WHEREAS, The way care is delivered has changed dramatically over the last decade with more people being treated in outpatient settings, shorter and more intense lengths of stay in acute and long-term care settings, and the development of alternatives to nursing home care; and

WHEREAS, These changes have led to a number of employment options becoming available to nurses that did not exist previously, making it difficult for employers of nurses to recruit and retain qualified nursing personnel; and

WHEREAS, In Maryland, the average age of the practicing nurse in the workforce is 46 years old; and

WHEREAS, Nursing school enrollments have dropped between 10 and 15%; and

WHEREAS, In 1998, approximately 2,085 nurses did not renew their licenses to practice in Maryland; and

WHEREAS, The current shortage is expected to worsen because of the declines in nursing school enrollments and the significant number of nurses expected to retire over the next decade; and

WHEREAS, Severe cutbacks in the federal Medicare program under the 1997 Balanced Budget Act, state budgetary pressures related to the Medicaid program, continued pressure from insurers to reduce their costs and to retrospectively deny payment for services rendered, and recent cuts to hospital rates by the Health Services Cost Review Commission have made it extremely difficult for many providers to keep up with other employers in salaries and benefits and to recruit and retain qualified nursing personnel; and

WHEREAS, The increasing reliance on temporary employment agencies to meet nursing personnel needs further complicates the situation as continuity of care is disrupted, quality of patient care is jeopardized, and costs pressures are further increased; and