



May 4, 2007

The Honorable George Miller
Committee on Education and Labor
2181 Rayburn House Office Building
Washington, DC 20515

Dear Mr. Chairman:

On behalf of the American Hospital Association's (AHA) nearly 5,000 member hospitals, health systems and other health care organizations, and our 37,000 individual members, and our subsidiary, the American Organization of Nurse Executives (AONE), which represents professional nurses in executive practice, we are writing to express our opposition to H.R. 1644. The legislation would amend the National Labor Relations Act (NLRA) to reverse the National Labor Relations Board (NLRB) guidance used to determine the essential characteristics of supervisory status. For hospitals, the issue affects primarily whether our charge nurses are classified as supervisors. This issue is critical to the safety of our patients and the management of the patient care environment.

Specifically, the legislation removes from the NLRA two necessary functions that classify a charge nurse as a supervisor: "assigning" and "directing" other staff. Charge nurses are often the most visible people "in charge" of a specific hospital unit, and their judgment and discretion are essential. NLRB guidance recognizes that charge nurses exercise independence and discretion in making critical judgments about patient care. A charge nurse assesses the acuity of a patient's illness, as well as which staff have the skill sets to best care for the patient. When serving in that role, the charge nurse acts on behalf of the hospital, providing a management/leadership voice to patients, families and other employees.

Hospitals never know who or how many patients will walk through their doors on any given day. The women and men who work in hospitals stand ready to treat everything from flu outbreaks to highway accidents and scores of other sudden emergencies. It is essential that charge nurses be recognized for the leadership role they play in this challenging and complex environment. We oppose the legislation because it fails to recognize this important and unique role.

The legislation is entirely unnecessary; existing NLRB guidance strikes a reasonable balance in setting the criteria for when charge nurses function as supervisors. The NLRB has found that hospital charge nurses who regularly assign nursing personnel to specific patients and make the assignments based upon "the skill, experience, and temperament of other nursing personnel, and on the acuity of the patients," meet the test for supervisor. H.R. 1644 does not recognize the distinction.

We ask that you join us in opposing this legislation.

Sincerely,

Rick Pollack
Executive Vice President
AHA

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Chief Executive Office
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