Testimony in Support of SB 469 Virginia Smith June 9, 2015

Chairs Bates and Nathanson, thank you for the opportunity to speak with you today about the proposed reforms to Oregon's Nurse Staffing Law.

My name is Virginia Smith. I am a Registered Nurse, and I am a charge nurse on a Medical/Surgical floor at a medium sized hospital in the Portland metro area. I am the Co-chair of our hospital staffing committee, and I am our Chair of the Professional Nursing Care Committee. My role on these committees is to work with the nurses, each department, and administration to ensure safe nurse staffing and safe patient care conditions. I have concerns about patient safety and staffing practices at my hospital, as well as concerns over the ability of the state to respond in a timely manner when we call upon them for help.

The experience my colleagues and I had with the staffing law, and state enforcement illustrates why I believe the changes proposed in SB 469 are so important to ensuring adequate nurse staffing. Here's a brief summary of my experience:

- Administration, productivity, and budgetary decisions were made—outside of the staffing committee process—to downsize the ED in October 2013. These decisions were simply presented to the staffing committee, and though we objected, the decisions were declared final with no consideration from the staffing committee. SB 469 makes it clear that the staffing committee is the entity in a hospital that makes the decisions about staffing, and that the hospital must implement the plans approved by the committee, with a few emergency exceptions.
- The resulting staffing conditions in my Emergency Room prompted nurses to file a complaint with the state on December 19, 2013. We are still waiting for the state to finalize their investigation and issue recommendations to us. This is well outside the 60 day timeline for the state to begin investigations of complaints that is part of SB 469.
- After filing a complaint with HCRQI—we called in March 2014, four months later, to follow up since no one had responded to our complaint. We were told they were aware of the complaint and we would have to wait.
- We continued to call every 90 days after that, and it wasn't until January 6, 2015 that a state surveyor finally came. By then, many of the problems from our original complaint in our ED were resolved, and it was difficult for both the surveyor and our hospital to have a productive survey
- As of today, 18 months after filing the original complaint, and 5 months after the survey, we still have not received the final report and recommendations from the state.
- Our goal, in filing a complaint with the state, was not to be punitive, but to seek outside help in identifying and resolving the issues with staffing in the emergency department. The delay in the investigation and the report of the findings have made that resolution elusive.

With the provisions in State Bill 469, our complaint would have been followed up on much sooner, and my hospital's staffing problems could be addressed in a timely manner.

Patient safety and good patient outcomes are best assured by maintaining adequate nurse staffing. State Bill 469 will help hospitals and nurses provide safe patient care by:

- Ensuring staffing committees are a collaborative effort between administration and direct care nurses to establish staffing plans.
- Auditing hospitals every three years in order to ensure the plans in fact are in place and meeting the staffing needs of the hospital. Audits should be able to identify problem areas and the staffing committee and hospital should take quick action to correct them.
- Provide realistic and meaningful recommendations when staffing complaints are made

Thank you for your time and consideration. I urge your support of SB 469.