

March 18, 2021

Chair Gelser, Vice Chair Anderson, members of the committee, for the record my name is Kyndall Mason; I am a political and policy strategist for SEIU Local 503, focusing on long term care. SEIU represents more than 30,000 long term care workers, in various service settings including facility based and home and community-based care settings. I am submitting this testimony on behalf of those members in support of SB 714.

Staffing has been an issue in the long-term care industry for years, long before COVID 19, exposed it as a crisis. For years, our members have expressed that staffing has been the single biggest issue when it comes to being able to do their jobs safely and effectively. You will hear some of their stories today, to detail what short staffing looks like from the workers' perspective.

There are a lot of factors that lead to short staffing in a facility, and there is no silver bullet for the problem. The job is hard, it is emotional, and the wages and access to health care leave something to be desired, which leads to workforce recruitment challenges and high turnover. The workforce, mostly women, has been hailed as heroes and essential workers, after being on the front lines of the pandemic. They risked their lives, and the lives of their families to take care of our loved ones. Yet, their labor is undervalued, and they are treated as a line-item cost.

Labor is generally the highest cost for businesses. The business of caring for seniors is not a solely altruistic endeavor; employers seek to control operating costs and net a profit. However, when LTC providers balance their budgets on the backs of working women, through low wages or understaffing, both residents and workers suffer. When labor costs are reduced in long term care, it means lower wages and fewer workers on the floor, leading to poor quality outcomes for workers and residents. It also means that the worker pool for long term care is very shallow. It seems the ideas of low wages and understaffing have the opposite desired affect when it comes to the ability to attract and retain good workers.

Oregon has benefited from a trailblazer spirit in long term care, and it has led to a strong allyship between labor and the provider industry when it comes to passing visionary long term care policy. We hope to rely on our ability to work with providers to get good policy around staffing. It is clear from every perspective that staffing is a critical issue that needs attention. Senate Bill 714 is a vehicle to offer clarity and accountability to a set of rules and statutes that are currently left up to interpretation and good faith. Minimum staffing levels create clear guidelines around safety and staffing. 714 requires providers to consider acuity when determining staffing levels. This creates a streamlined system where providers, enforcement agencies, residents and workers all understand the same requirements and expectations.

Currently, providers are required to provide appropriate staffing to meet the 24-hour needs of residents, perform a two-person lift, and evacuate the building. It remains to be seen how to



effectively follow and enforce those set of rules. A minimum ratio would help employers, families, residents and workers understand the expectation to be met when it comes to care.

Twelve states currently employ minimum staffing ratios. And everyone one of those states differ in their approach and investments in long term care. These states have more nursing home settings than assisted living. These other states are regulating a smaller share of long-term care settings, but they clearly see the need to add clear standards around staffing in this growing industry. Oregon invests more in home and community-based care than nearly every other state. In Oregon, home and community-based care settings make up most of the settings and statewide investment. It would be prudent to ensure safe staffing levels, and clear guidance on how to get there. The minimum ratio and the option to use the acuity-based tool, creates flexibility for providers and shared expectations for consumers. Knowing that this bill is not in its final form, we would like to make sure we are a part of the conversation moving forward, as workers are a key component to the dialogue around staff staffing levels.

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