



2/22/2021

Chair Prusak, Vice-Chairs Hayden and Salinas,
and Members of the House Healthcare Committee,

As the Vice Presidents of Nursing from all five Samaritan hospitals, we are writing in opposition to HB3016 which imposes additional and unnecessary layers of complexity and inflexibility to a Nurse staffing process that is working well for our hospitals, nurses, providers, and patients.

We have had unique circumstances as a state during 2020, ones that created new or unforeseen demands on systems, as well as tremendous opportunities to learn and adapt. Leading day to day operations is challenging even when in "normal" times. Lessons and ideas abound from the pandemic and fires, but one thing we learned is certain – **emergencies and acute crises require staffing flexibility and the ability to adjust operations rapidly to meet changing circumstances. Our current nurse staffing plans and requirements allowed us those abilities.** New and/more restrictions and mandates would have negatively affected our efficiency and ability to adapt.

Attempts to force unnecessary collaboration on a problem that is difficult itself to identify would create an additional and unnecessary barrier between caregivers and leadership. We focus as a team on providing the best staffing and care plans and are already working together to determine how to best meet the needs of our community.

2020 proved to us that what we need is more flexibility and ability to react quickly and decisively during emergencies. This bill does just the opposite. We urge and appreciate your opposition to HB3016.

Very Truly Yours,

Sam Jones, RN, MSN/ADM
Costal VP of Patient Care Services
Samaritan Pacific Communities Hospital, Samaritan North Lincoln Hospital

Melinda Papen, RN, MSN, CHPCA
VP – Patient Care Services
Samaritan Albany General Hospital

Tim Eixenberger
V. P. of Patient Care Services
Good Samaritan Regional Medical Center

Wendie Wunderwald RN MSHCA CENP
VP Patient Care Services
Samaritan Lebanon Community Hospital