Submitter: Mary Johnson

On Behalf Of:

Committee: House Committee On Behavioral Health and Health Care

Measure: HB2697

To Whom ever May Listen:

I entered nursing in 2009 and I have worked across this country from the east coast to west.

I have spent 14 years serving my patients and my community because that is what I was called to do.

I am an Oncology RN who has served on the frontlines during COVID. Worked through H1N1. Ebola 2015. Earthquakes. Floods. Fires. Blizzards.

In 2021, I became the RN Inpatient Contract Specialist for OFNHP through the labor management partnership with Kaiser Permanente.

During my time as contract specialist, I received and reviewed ADOs (assignment despite objections). These are forms that staff use to report that something is not right, to track data and for management to address the issues.

I sent over 50 ADOs over to the Oregon Health Authority of concerns/staffing plan violations which SB 469 gives them jurisdiction of.

OHA called a meeting with me on several occasions to tell me to stop. That reporting the concerns to the same governing agency that is to protect our patients, I was bogging their system down. I defended my action as OHA needed to know. I at the time was the advocate for those caregivers who needed help. Did OHA perform investigations? Yes. Did they find violations at SMC and WMC. Yes. Has anything changed? No and I fear nothing will improve.

I can't look my patients in the eyes anymore and apologize for the care they aren't getting.

Healthcare systems are having healthcare professionals complete trainings to provide better customer service. The worst part is we already know what the best solution is, Staffing!! Data supports that when staffing numbers are good patients are happier. In place of spending money on improving recruiting or retention, we get lessons on how to better response or smile with our eyes. You simply can't ignore that lower nurse to patient ratios reduces the risk for long term complications and increases better patient outcomes.

I'd like to share just one ADO, as an example of concerns I brought up to OHA.

"1 CNA for 21 patients. There was no unit secretary. The charge nurse had a patient load on top of charge nurse duties. The majority of the patients were total care. The lack of staff resulted in a patient falling. The patient called to go to the bathroom, no one was able to get to them in time and they tried to go by themselves and fell. Additionally, medications were late, patients weren't turned every two hours and there was an increased risk of medication errors and injury due to the unsafe staffing. I had to stay after 0700 in order to hand over the patient I was caring for to the next shift so was forced to stay."

Now imagine if this was the care you were getting, or your spouse, or your family. We all know this isn't the care we want to provide. We want to do good patient patient.

The patients need you to Vote yes. Please. Oregon residents deserve more. We know what our patients need: they need qualified staff that can listen to them and understand their needs. To met their needs you need to improving all healthcare professionals to patients ratios.

If you can't help, if you won't help, please help me find a job and many more of us who can't fight anymore and are unwilling to be forced to provide subpar care.

Respectfully, Mary Katherine Johnson