

February 23, 2023

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Subject: Public testimony in support of HB 2697

Dear Chair Nosse, Senator Manning Jr, Rep. Nelson and Senator Patterson and committee members.

Thank you for your commitment to public health advocacy in the State of Oregon and your transformational leadership in bringing HB 2697 forward for public hearing during the 2023 legislative session. I have practiced as a registered nurse in the State of Oregon since 2006 with 15 years of that time in the inpatient acute care hospital setting. Recently, I have served as the Hospital Nurse Staffing Committee Co-Chair at KWMC (2017-2020) and currently as the Nurse Staffing Advisory Board (NSAB) Co-Chair (2021-2023). With full disclosure, this public testimony represents my personal position on HB 2697 and not that of NSAB or any other entity I may be affiliated with.

The passing of SB 469 in 2015, set the groundwork for increasing hospital system accountability, transparency and shared governance between direct care nurse members and nurse managers toward the common aim of developing and implementing safe hospital nurse staffing plans that when upheld would satisfy the intent of the law which remains - *patient safety*. HB 3016 enacted into law in 2021 provided a timely amendment expanding on use of *contingency staffing plans* and *crisis standards of care* during a national or state emergency declaration.

Continued challenges with the nurse staffing law are well documented in the annual ***NSAB legislative reports*** publicly shared on OHA website; volumes of nurse staffing complaints filed with state agencies and representative unions where applicable; repeated nurse staffing law tags during first and second tri annual surveys and revisits audits conducted by OHA; such as E640 (minimum numbers of nurse staff members during specified shifts) and E646 (tasks not related to providing direct patient care i.e. meals and rest breaks), identified as tags closely related to unsafe patient care.

HB 2697 serve as learned experience that SB 469 and corresponding OAR 333-510-0002-0140 remain significantly incomplete, falling short of upholding *patient safety* even risking worsening Oregon's precious and scarce resource - its stretched and exhausted healthcare workforce. Report from the workforce shortage study (HB 4003) reveal insights on sensitive indicators such as nurse and support staff burnout prevalence, and regulatory strategies to address them (Spetz, J, 2022). American Federation of Teachers Healthcare Staffing Shortage Task force reveal the systematic underinvestment; in healthcare workers safety and wellbeing; education; and compounding impact of COVID-19 on the staffing crises, while also proposing proven strategies to tackle the problem such as enacting state laws mandating safe staffing ratios for the whole healthcare team (AFT, 2022).

HB 2697 rule text in its essence speaks to a plea for increased healthcare system accountability and corresponding staffing law enforcement, establishing safe staffing level safety thresholds; and a recognition of the *essential role* that technical and service staff contribute to promoting improved patient safety, quality of care, care without delay leading to improved organizational and healthcare quality outcomes within a patient centered value-based healthcare delivery system. Within *complex adaptive healthcare systems* that are hospitals, it is imperative to recognize the essential role that each team member contributes toward the organizational mission and State/national healthcare goals. The future of nursing report (2020-2030) calls for the importance of building interdisciplinary partnerships, replacing hierarchical with collaborative leadership with respect to community health and health equity (NASEM, 2021).

An investment in patient safety and the *people* that deliver that care met by health systems re-commitment to the principles of highly reliable organizations (sensitivity to operations, preoccupation with failure, reluctance to simplify, commitment to resilience and deference to expertise) will yield a positive return on investment measured in *improved patient access and outcomes* and a just and thriving State of Oregon. We all win, when we pass HB 2697 into law.

Respectfully,

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References

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