Dear Chair Nosse, Vice Chairs Goodwin and Nelson, and members of the committee,

I'm Peggy Elia, a nurse at Providence Milwaukie Hospital and I support HB2697

At the hearing, Vice-chair Goodwin noted that Oregon offers some of the highest nurse wages in the nation. Representative Diehl noted that an open nursing position offered a \$20,000 bonus. So why are nurses running away from the bedside? Why are experienced nurses who love their jobs and receive important benefits such as healthcare leaving? Why don't new nurses stay?

The American Nurses foundation noted in 2021 that 41% of nurses planned to leave the profession citing insufficient staffing as a reason. An alarming statistic cites rates of up to **33%** of new nurses leaving the workforce within the first two years. New grads are overwhelmed and have few experienced nurses to turn to especially on the night shift. This is not safe.

Over the past 20 years, more than 100 research articles have demonstrated that poor staffing ratios are associated with significantly greater risk of patient injury and death. A landmark study from the Journal of the American Medical Association (JAMA) found that an increase from 4 to 6 patients per nurse was associated with a 14% increase in mortality and going up to 8 patients was associated with a 31% increase in mortality. This has a disproportionate impact on People of Color, contributing to an already inequitable healthcare system. HB2697 would reduce patient ratios, thereby improving outcomes, saving lives, and promoting health equity.

As you have read in powerful testimonies from across the state, many nurses spend their 12 hour shifts running from room to room with no time to take a break or sit down. They also describe being unable provide patients with the care they need as they race against the clock, balancing too many assignments at once. This leads to burnout, dissatisfaction, and moral distress, which are "precursors to turnover." In fact, nurses are leaving the bedside at record rates. HB 2697 would lay the groundwork for a more sustainable healthcare workforce, promoting retention and halting a vicious cycle.

Minimum safe staffing ratios are not inflexible and will not impede team nursing as was purported by opposing testimony. When an emergency department nurse has 3 patients and one of them is sleeping off their alcohol or waiting for a ride, that nurse will step in to help their colleague who just got an ambulance or is taking care of a very sick patient. The reality is that with safe ratios, nurses can do

that. If everyone is swamped with too many patients of their own, care is inflexible and team nursing falls apart. When a stable patient comes in with an allergic reaction they will be treated promptly and discharged rather than linger unattended while a nurse has four other patients until they are found in anaphylactic shock, requiring a breathing tube, this happened in our emergency department. It's misleading to claim that patients will be turned away due to ratios, there is a law called EMTALA that prohibits it.

Providence Milwaukie, where I work as a nurse, is currently attempting to implement a staffing model from Texas that INCREASES patient to nurse ratios. That means each nurse will have more patients, up to 8 on night shift. Our Chief nursing officer is a certified black belt in lean healthcare from six sigma. He is focusing on a model that would REDUCE the number of nurses at the bedside, rather than implementing changes that would recruit and retain nurses.

This bill also advocates for all of the allied healthcare workers who currently don't have a voice at the table. They are our partners in patient care and are experiencing the same struggles and barriers to care that unsafe staffing creates.

Patients are already waiting and receiving delayed care, allowing unsafe staffing levels makes this crisis worse. Oregon can be a leader in positive change. When you deliberate this bill please listen to caregivers and address unsafe staffing, the major factor contributing to the lack of nurses and healthcare workers, today.

Thank you for considering this critical bill.

Peggy Elia, RN

Providence Milwaukie Hospital