

Aaron Green
Service Employees International Union, Local 49
HB 2697
February 27, 2023



Testimony to the House Committee on Behavioral Health and Health Care in support of HB 2697

Chair Nosse and Members of the Committee,

My name is Aaron Green and I am a CNA 2 at McKenzie Willamette Medical Center and a proud member of the SEIU Local 49 Executive Board. My commitment to working in healthcare grew out of a desire to help people sparked by my experience helping to care for my grandmother after she had a stroke. I wanted to help people and working in healthcare seemed like the best way to do that.

In addition to my current work as a CNA, I've done home health work, worked in a long-term skilled rehab facility, worked in the PeaceHealth system for four years, and have now been at McKenzie Willamette for four years.

I've seen the staffing crisis first-hand, in a variety of different settings and from a variety of different positions. Oregon nursing homes have actual ratios for CNAs and are required to have a certain amount of staff at any given time, whereas in a hospital setting – where patients require more care – there isn't the safeguard of staffing ratios. Working in a hospital I've seen situations where there is only one CNA to 36 patient beds due to short staffing. Realistically that means a CNA could only spend 15-20 minutes with each patient, making it nearly impossible to provide adequate care.

When my unit is adequately staffed, each CNA is assigned between 9-12 patients. Yet I once experienced a shift where I was assigned 18 patients; I was one of only two CNAs on the floor. It was extremely chaotic and I spent the shift bouncing between rooms trying to take patient vitals in between answering call lights. We were so short-staffed that the registered nurses had to pick up care responsibilities in addition to their primary nursing duties. It was simply impossible to provide our full range of care, such as providing medication and conducting dressing changes.

The staffing crisis affects all corners of our hospitals. We are short staffed in housekeeping where I have seen only one housekeeper responsible for an entire floor by themselves. This means a single housekeeper is responsible for cleaning 36 patient rooms, and patients end up waiting for hours in the halls on gurneys while waiting for a room to turn over. These patients don't receive meals, they can't see their family, and they aren't given advance warning of how long they will be waiting. Many of these patients are waiting to transfer to a hospital room from the ER or are coming out of surgery, and they understandably get upset at these long, uncomfortable waits.

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I am the CNA representative on the nurse staffing committee at my hospital, and use my position to raise the staffing concerns of my co-workers and bring those concerns to the attention of managers and HR directors. Time and time again I am told that our staffing problems are due to the impact of employee wages on the hospital's payroll, yet Oregon nursing homes have starting wages of \$22.00/hr – far above our starting wages – and those same nursing homes have staffing ratios and safety nets put in place to protect both their patients and their workers. I don't have those protections working in a hospital. If a co-worker calls out then I could end up responsible for an entire floor all to myself.

Low staffing creates a self-perpetuating cycle of burnout and turnover, which makes it harder to recruit and retain qualified staff. At McKenzie Willamette we've lost three new hires recently who completed their orientation but then quit after being put on the floor and realizing the true nature of their working conditions.

I became a CNA because I wanted to help people, and *all* healthcare jobs play an important role in helping our communities and keeping Oregon patients safe. We need more staff, and we need to provide healthcare workers with the reassurance that if their hospital or health system doesn't follow their staffing plan when they go to work that there's going to be some basic protections and some meaningful recourse rather than just a slap on the wrist. I appreciate the opportunity to share my experience with you today and hope that you will support the important protections in HB 2697.

Thank you.

Aaron Green

CNA 2, McKenzie Willamette Medical Center

Executive Board Member, Service Employees International Union Local 49