



March 22, 2023

Good morning Co-chairs Valderrama, Campos and members of the Joint Subcommittee on Human Services,

For the record, my name is Connie Parker and I am a member of the Executive Board as well as a Union Steward for AFSCME Local 3295, Oregon State Hospital RN's. I have worked at the State Hospital for almost 26 years.

When I started at OSH in April 1997; I was told that my purpose for being there was to assist the patients to become; to the best of their ability, productive members of society should they be released. To help them acquire Legal Skills, coping skills, anger management skills, life skills; whatever they needed, to better prepare them to cope with life and their mental health outside of OSH. It is my job to oversee the safety of these human beings as they are in a vulnerable and compromised state and unable to cope with the stressors of life for whatever reason. Without the Nurses and MHT's, there would be no one to care for these individuals and they would be either lost in society or languishing in a jail cell not getting the treatment and help that they need.

Through my years at OSH, there have been many changes in staffing levels, but I have never seen the Staffing Crisis level that we have been experiencing the last 3 years. Since the start of the pandemic, the staffing shortage has gotten so bad, not only did they increase the hiring of Agency staff, but also required the assistance of the National Guard. They also pulled OSH staff from non-nursing departments that had never worked on the units, (or even stepped onto a unit). **The majority of these people had no Mental Health experience and did not have the training to deal with some of the challenging behaviors of the patients we serve, which caused an unsafe situation and potentially put patient and staff's lives at risk.**

For example, during the crisis, I personally worked on the floor with a Person from the Patient Benefits Coordinator's office; a few Environmental Services personnel, a Supervisor from a non-nursing department; and an OSH Dentist. The night I worked with the Dentist, there was only 3 of us on the floor, the other staff being a new hire who was just out of orientation. The Dentist spent the entire shift remarking on how the situation was unsafe and how he had no idea how I continued to work on the floor in these unsafe conditions. He asked me what he should do if a Patient had a psychotic episode and became violent. I told him given our current situation and the lack of experience of 2 out of the 3 staff that night; if he ran away to safety to please call for help, that way I knew that hopefully someone would arrive to assist me. That night, as well as many others I was unable to complete all of my other required nursing duties as I was assisting my staff to complete theirs. "We're trying to do our best with the resources that we have but we cannot perform all of the duties without adequate staffing."



The lack of consistent staff on the units affects the patients we are trying to serve. While I have experienced shifts with “regular” unit crews, there are shifts where there was not one regular staff on the unit. Our more vulnerable patients, feel safer with consistency and seeing a bunch of unfamiliar faces can cause them even greater stress than they are already experiencing and has resulted in dangerous assaultive behaviors. Staffing stability at OSH is crucial to meet the needs of the patients receiving care and to continue to be in compliance with federal court order from Judge Mosman to admit and discharge Aid and Assist patients in a timely manner.

Since the start of the Pandemic, I have seen multiple Nurses leave OSH. Some went to work at one of the prisons because working at the prison was safer than working at OSH. Some went to work for one of the Travel Agencies because the pay was so much better than Nurses are currently getting at OSH. We don't have enough Nurses to care for our patients as it is, and those of us that are here are tired of having to work short-staffed or getting mandated because they can't find another nurse to relieve us. One of our Nurses ended up being mandated for 11 hours past her regular 10-hour shift because they could not find another nurse to relieve her. A long-term solution is needed, and we would love to engage in conversations where these decisions are being made. In order to continue providing care for our patients, we need to retain the staffing levels we currently have and cannot afford to lose anymore nurses to travel agencies.

While this committee is in the process of drafting their budget for the next biennium, I strongly urge you to remember our stories when allocating monies so that the Hospital has adequate staffing to meet its mission and goals and direct OHA to find new ways to recruit and retain workers to keep us from burnout..

Connie Parker