



Chair Grayber, Vice-chairs Lewis and Tran, and members of the Committee On
Emergency Management, General Government, and Veterans,

My name is Katie Moreland, and I work as a Mental Health Registered Nurse at Oregon State Hospital. I've worked here for 2.5 years. I knew I wanted to become a nurse after my mother had several health complications while I was growing up and saw the positive impact that nurses had on her care. I graduated from OHSU-Monmouth at 24 years old and after having a clinical rotation at both OSH and Coffee Creek Correctional Facility, institutional nursing piqued my interest. I am writing in support of HB 2701 with the -3 amendment so that we can receive benefits from working in high risk and high stress.

The staff at OSH work with a diverse and underserved population that is often overlooked by their communities. Myself and many others enjoy working with this population to assist in improving and stabilizing their mental health while demonstrating appropriate social skills and providing tools for them to aid and assist in their own defense and utilize in their day-to-day life afterward. Due to the pandemic and other factors, we lost a significant number of qualified staff, requiring agency positions to fill their vacancies. With agency staffing coming to an end, the hospital is looking at a severe and continued staffing crisis. Without the ability to retain an appropriately sized workforce, the wellbeing of our patients and remaining staff will suffer greatly.

When I first began working at the hospital, I worked in a relief pool, often working on a different unit each day. Three months after I started, I was assigned to work on the designated COVID unit for six months until I secured a permanent position on one of the maximum-security units. I worked on that unit up until a few months ago when working in such a high-risk and high-stress environment took its toll on both my mental and physical health and I transferred to a lower acuity medical unit. Prior to transferring units, I could anticipate having to utilize my de-escalation skills for dysregulated or patients with behavioral issues or place patients into seclusion or restraints due to assaults on each other or staff on a daily basis. Anticipating these events caused prolonged and severe anxiety each day I worked. After transferring units, I continue to have anxiety coming to work, even though I am in a "safer" part of the hospital due to my previous experiences, including witnessing and hearing of assaults on my coworkers, patients, and being assaulted myself on two occasions. The effects are not limited to when I am present at work. Outside of work, I have little time to recover mentally and physically as the symptoms of burnout continue. I experience headaches, fatigue, apathy, irritability, and either excessive or minimal sleep, among others. These symptoms affect my personal relationships greatly due to the symptoms I experience. Despite the challenges of working at OSH, there are many reasons to continue to work here, some of which I stated above.



Providing OSH employees with the items listed in HB 2701 would help retain current employees and provide incentive for those that are interested in working here as well. HB 2701 with the -3 amendment would create a new “high risk/high stress” category in PERS for OSH employees and 911 operators, allowing us to retire earlier with full benefits, as well as receive an increase in final average salary.

Passage of this bill is important because it would increase incentive for new recruitments to assist in OSH’s staffing crisis and most importantly, it would help current OSH employees feel the high-stress and high-risk positions we work in are seen, valued, and respected by legislation.

Thank you for allowing me to testify on this bill and I hope you vote yes on HB 2701.

Katie Moreland