

To the Members of the House Committee on Health Care:

My name is Brandy Schulte, and I am a nurse in Portland. I am writing in opposition to HB 4074 on behalf of the patients whose safety and dignity depend on enforceable staffing standards.

Safety and dignity are basic minimum standards of care that every patient deserves. Yet Oregon nurses and CNAs continue to struggle to provide it. Why is this happening when we have passed a law that implements ratios ensuring safe staffing? It's happening because hospital executives see their staff as an expense burden, a line-item in the budget that can be slashed without consequence.

But there are consequences.

When staffing is cut, the impact is not abstract. It is immediate and personal. Bedbound patients do not get turned and go without timely incontinence care. Patients unwilling to soil the bed get up on their own when their call light isn't answered and fall because they forget they're attached to an IV or wearing compression sleeves. Patients go days without a bath or shower. There are delays in medication administration. Patients feel unseen, unheard, and abandoned at one of the most vulnerable moments of their lives.

I have seen this on my own unit. I work on a 20-bed medical-surgical unit in Portland. Under Oregon law, CNAs should be staffed at a ratio of 1:7 patients until 11 p.m. That means we should have three CNAs on shift.

Instead, our hospital has exploited a loophole by leaving some patients without an assigned CNA. As a result, our unit is staffed with only one or two CNAs. That leaves six — and often as many as thirteen — patients without dedicated CNA support. There's even less support overnight.

These patients still need help. They need assistance with hygiene, with ambulation, with eating, toileting, and preparing for discharge. Without enough CNAs, those responsibilities fall to already overextended nurses who are simultaneously managing medications, assessments, admissions, discharges, care coordination and emergencies.

This is not about convenience. It is about safety. It is about preventing falls, pressure injuries, infections, and avoidable harm. It is about whether patients are treated with basic dignity.

We are working to find solutions with our administrators through our Hospital Staffing Committee. There has been both gridlock and progress. **But safe staffing laws only work if hospitals are required to follow them in both letter and intent.**

HB 2697 was passed to strengthen safe staffing and protect patients. HB 4074 would undermine that progress. It increases ratios and allows hospitals to pass staffing plans without approval from the staffing committee — effectively removing the guardrails that ensure accountability.

HB 4074 does not solve the staffing crisis. It makes it easier to justify unsafe conditions and weakens the very protections designed to address it. It puts patients at risk and limits nurses' ability to advocate for their safety.

I urge you: do not pass HB 4074.

Our patients deserve safety. They deserve dignity. And they deserve laws that protect both.