

Testimony of Christy Simila, Oregon Nurses Association

HB 4074: Oppose

February 10, 2026

Good afternoon Chair Nosse, Vice-Chairs Diehl and Nelson, and Committee members. My name is Christy Simila, I am a registered nurse, and I am speaking in strong opposition to House Bill 4074.

I began my nursing career—and spent many years—on a medical-surgical unit. This is where nurse turnover is highest, patient harm is most documented, and nurses are routinely pushed to the breaking point.

HB 4074 would permanently delay the move to a 1:4 nurse-to-patient ratio and lock med-surg nurses at 1:5. Hospitals agreed to the 1:4 timeline in 2023. Rolling it back now is a betrayal of that agreement—and of the nurses who stayed in this profession because they believed meaningful change was finally coming.

This decision would cost lives and, despite hospital claims, it would also cost them serious money. This is not speculation.

A 2021 study showed that if just one hospital had staffed med-surg units at 1:4 for a single year, **more than 1595 patient deaths would have been avoided**, and **hospitals would have collectively saved over \$117 million**. ([Patient outcomes and cost savings associated with hospital safe nurse staffing legislation: an observational study](#)) Increased nurse staffing is consistently shown to be one of the most cost-effective ways to improve patient outcomes (Nursing Administration Quarterly, 2011).

Nurse turnover is also expensive— the average cost to replace a single bedside RN is over \$61,000, and hospitals are losing between \$3.9 and \$5.7 million a year due to RN turnover.

(https://www.nsinursingsolutions.com/documents/library/ansi_national_health_care_retention_report.pdf).

Inadequate staffing increases infections, pneumonia, pressure injuries, and preventable complications—each of which carries enormous human and financial costs.

Hospital-acquired pressure ulcers alone cost the healthcare system an estimated \$8.5 billion annually ([Agency for Healthcare Quality and Research Pub. No. 04-0029, 2004](#)).

(PAUSE)

Med-surg nurses are already absorbing massive cuts to support staff. They are doing more non-nursing work, with fewer resources, while caring for sicker patients. Asking them to take on even more patients is unsafe, unethical, and indefensible.

If the legislature knowingly maintains staffing levels that increase patient mortality, then we should be honest about what this bill does. HB 4074 chooses hospital convenience over patient survival.