

Submitter: Susan Ashenfelter
On Behalf Of: Hospital Nursing
Committee: House Committee On Health Care
Measure, Appointment or Topic: HB4074

Written Testimony in Opposition to HB 4074

Chair Nosse, Vice Chairs Nelson and Diehl, and Members of the Committee:

For the record, my name is Susan Kay Ashenfelter. I am a Registered Nurse and have worked for 20 in various positions including as a Hospital Orthopedic nurse, a Hospice Nurse, a Hospital Medical Surgical Nurse and as a Hospital Float Nurse who works with Postpartum, ED, Progressive Care Unit and Medical Surgical clients. I currently work at Kaiser Westside Medical Center in Hillsboro Oregon, and I am a member of the Oregon Federation of Nurses and Health Professionals (OFNHP AFT-5017). I am writing in strong opposition to HB 4074.

I work full time to provide direct patient care, and the nurse staffing law passed in 2023 has a real impact on my ability to do my job safely and effectively. HB 4074 would make significant changes to the enforcement of that law. If passed, our already strained staffing realities will become more unsafe for each and every patient under our care, risking our professional licenses and patient's outcomes. Already only the most stalwart nurses take on the challenges of Hospital nursing, and we have an increasing ratio of staffing turnover due to unrealistic expectations on a human being. I have seen people move away from the bedside to protect their years of service with a corporation that we are constantly correcting for staffing abuses. The newest generation has very few veteran nurses which they can rely on for solid experienced-based critical thinking because we are losing those nurses from the bedside due to inappropriate and unsafe staffing.

HB 2697 was the result of years of research, negotiation, and stakeholder engagement. Rushing through changes to the statute will only put providers and patients at risk. Advancing HB 4074 now would shortcut that process and risk unintended consequences that cannot be fully evaluated in the limited time available. From my experience, the current law is working as intended, and barriers to passing plans are rooted in unwillingness to utilize escalation and acuity tools. Hospitals were given ample time to comply, and the vast majority have done so.

The institution of break nurses has been particularly successful in both boosting the performance of hospital nurses, enjoying the feedback of nurses who step in temporarily, and creating trust and appreciation from our hospitalized clients. When I tell them, "I get to eat and take care of myself so I can take better care of you," I get 100% positive feedback from my patients (clients).

I view this attempt of the corporatized health care system to reduce the effective care for our patients to numbers as a push to prioritize money over safety and outcomes. One person can only do so much, even with years of experience in prioritizing care, resource management, deep understanding of the systems available and delegation process. We have clearly demarcated in the Medical Surgical unit that with a

responsibility of 4 patients per nurse we are functioning to our maximum capacity with the resources available and the patient acuities that we face. With a higher load patients will find their needs overlooked, missed or postponed and therefore outcomes will suffer for the patients. I worked nights in units where we had 6 patients each and without fail the outcomes were disastrous.

Weakening enforcement through delayed penalties or reduced accountability would effectively suspend the law without the thoughtful analysis such changes demand. For these reasons, I respectfully urge you to oppose HB 4074 as currently written. Thank you for your time and consideration.

Sincerely Susan Kay Ashenfelter,
Registered Nurse, Staff Nurse