

February 6, 2022

To: House Interim Committee on Health Care

Dear Representatives,

We write in support of HB 4003 with the exception that we ask you to consider home health and hospice organizations in the proposal. We are nurses and physicians who work in hospice and represent the Oregon Hospice and Palliative Care Association and the Oregon Non-Profit Hospice Alliance. The nursing shortage has hit all sectors of health care drastically. We have shared this impact in the New York Times (1) and the Oregonian (2). Home health and Hospice are critical services which enable hospitals to discharge patients safely, and allow patients to avoid hospitalization. Unfortunately, home health and hospice short staffing have resulted in severe delays (and in some cases complete closures to new admissions for weeks). There is already a maldistribution of nurses into hospital care over home health and hospice (most commonly because of pay differences). Without addressing the impact of nursing shortages on home health and hospice services, Oregon risks having hospitals continue to overflow with patients (those who cannot discharge and those who could have been taken care of in their home instead of admitted).

- 1) We highly support establishment of a Workforce Advisory Committee to study the nursing workforce. An actionable study must look at the nursing shortage impacts on ALL SECTORS of the health care system in order for Oregon to develop comprehensive solutions that don't just focus on hospitals and long term care. Home health and hospice must be included in the study to be valid.
- 2) We strongly urge that Section 12 be amended to allow nurses from out of state to practice in home health and hospice settings. Excluding these sectors of the health care spectrum from the list of allowed assignments is a grave oversight. Adequately staffing hospitals and long term care is only part of the solution. Without home health and hospices to provide post-acute (and hospital-alternative) care, Oregon's well-staffed hospitals and long term care facilities will continue to face bottlenecks.
- 3) We applaud HB 4003 for including nursing professions in Oregon's Wellness Program to help with burnout and the tremendous distress coming from working through a pandemic. We have personally seen how RN and LPN colleagues on the front lines of hospice care have experienced tremendous moral distress. They should be included in the state's mental health counseling program for health providers.

Thank you for taking important steps to address Oregon's nursing shortage. But we urge you to recognize that patient care suffers when we silo hospitals and long term care facilities. Patients need seamless transitions between hospitals and home (including long term care facilities) which requires adequate nurse staffing in home health and hospice care.

Regards,

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- 1) Span P. (2021, Oct 16) Short on staff, some hospices ask patients to wait. New York Times.
- 2) Kao H, Hansen B. (2021, Dec 6) Hospice depends on solving nursing shortage [Letter to the editor]