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February 20, 2023

Attn: Members of the House Committee on Behavioral Health and Health Care (HB 2697  
- Testimony In Support)

Dear Representatives Nosse, Goodwin, Nelson, Bowman, Conrad, Dexter, Diehl, Javadi,  
Morgan, Pham, and Tran:

My name is Darlene Arruda and I am a nurse at St. Charles Medical Center, Bend.

The work environment for nurses at St. Charles is extremely troubling. Not only are we regularly understaffed, we frequently do not have enough ancillary staff to ensure we get our required breaks. Working long shifts of 12 hours or more, without a break or a lunch, is exhausting and, quite frankly, dangerous for both nurses and patients. We are burning out at a record pace.

US News and World Report recently reported that, "among the many challenges facing hospitals, none are bigger than workforce burnout...and nowhere is that challenge showing up more than with nurses, the backbone of any health care system." Additionally, a recent survey by Bain and Company showed that more than 25% of nurses and other healthcare providers are seriously considering leaving healthcare forever "primarily due to unrelenting burnout." But we also know that Oregon had a staffing shortage long before the pandemic. Hospital administrators made profit-focused decisions to not invest in recruitment and retention of staff for years, all while pocketing hundreds of thousands of dollars in salary and making millions off the stock market. Yes, the COVID 19 pandemic has made already-existing staffing issues worse, and Oregon is now facing a full-blown crisis as countless overworked and under-valued healthcare workers leave the bedside in search of safer working conditions, better pay, or leave their profession entirely. Nurses and other healthcare workers have been asking hospital executives and managers for help for more than a decade, but their pleas have fallen on deaf ears. Our legislation seeks to address many of the root causes of this crisis.

Respectfully submitted,

Darlene Arruda