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House Bill 2697 Testimony

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

My name is Mackenzie Chown and I am a nurse at Oregon Health and Science University.

We all know that Oregon has been suffering from a statewide staffing crisis for many years - far before the COVID 19 pandemic began.

Although Oregon does have a nurse staffing law in place today, it is absolutely crucial for you to understand that one of the root causes of the crisis we face is the failure to adequately enforce key provisions of Oregon's current law.

HB 2697 fixes this problem by requiring the Oregon Health Authority (OHA) to enforce those provisions, rather than letting hospitals get away with repeated violations.

For the last two years I have spoken out against Oregon Health and Science University for the constant violation of our state's safe staffing law and the constant disregard for our patients, endangering both new parents and their newborns due to "budgetary restraints."

We were the last hospital in the area to staff to Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN) standards. We were told these standards were for rural hospitals with no central monitoring for years and years, this was not true. AWHONN are the standards recommended by our professional practice to keep birthing patients safe. We finally were able to have AWHONN standards included in our staffing plan, however we are still told we cannot hire the nurses to maintain these standards.

Hospitals like Oregon Health and Science University need to be held accountable. Oregon health authority (OHA) is responsible for holding our hospitals accountable.

I have made several OHA complaints, all of which have gone unanswered. As a pregnant person myself, I feel unsafe delivering at a hospital with inadequate staffing from nursing to anesthesia coverage to emergency obstetrics care. I know my team and staff at Oregon Health and Science University are compassionate and competent care providers, but when we are asked to take care of more patients than we are physically capable of, it is inherently unsafe and detrimental to the patients and healthcare providers caring for them. Oregon Health and Science University had made it clear that seeing staffing through a fiscal lens and maintaining budget matters more than patients like myself and my baby. Oregon Health and Science University and OHA have failed us and most importantly they have failed our patients. Our communities deserve better.

OHA provides ample evidence that they have not enforced the law in any meaningful way since they began surveying hospital nurse staffing in 2017. In 2021, OHA surveyed 15 hospitals and as of October 10, 2022 have accepted plans of correction from only 9 of them. One hospital, Oregon Health and Science University, is on its 6th plan of correction nearly 1 and a half years after OHA cited them over a dozen times for repeated non-compliance with several provisions of the law, including failing to consider how nurses get meal and rest breaks and establishing minimum staffing levels in staffing plans.

That is just one example out of dozens available to review on the OHA Nurse Staffing website. Hospitals willful disregard for the staffing law are extensively documented in the public record. OHA has never issued a civil monetary penalty even though 24 of 25 hospitals who underwent revisits from OHA received citations for repeated non-compliance, demonstrating hospitals made no effort or progress in complying with the law. This pattern of disregard for the staffing law and for the voice of frontline nurses, is enabled by OHA's lack of enforcement the law.

HB 2967 fixes these problems with the law: it closes loopholes by establishing minimum staffing levels, ensuring nurses get meal and rest breaks, and it improves enforcement processes with tools to hold hospitals accountable and requirements for OHA do so.

Thank you,

Mackenzie Chown