

Jamie Harbick
126 NW Chamberlain St
Unit 2
Bend, OR 97703

February 26, 2023

RE: Testimony in Support of HB 2697

To the House Committee on Behavioral Health and Health Care,

My name is Jamie Harbick and I am a Registered Nurse at St. Charles Bend in the Emergency Department.

The working conditions in the ED are extremely challenging at this time due to insufficient staffing of nurses, technicians, social workers, housekeepers, and transport staff. When nurse staffing is insufficient delays in care, mistakes, and workplace stress rapidly escalate. When ancillary staff are missing the burden of care falls on the nurse assigned to a patient to meet all of their care needs.

I act as a social worker to severely mentally ill children and adults though I have limited skills and training to handle these complex needs. There is the daily threat of violence from people with unmanaged psychiatric needs being housed in the ED for days, weeks, and months at a time.

I stock my own rooms and transport patients around the hospital taking away from patient care needs. ED techs and transporters are employed to help with these tasks, but there is rarely a shift when either are fully staffed. St. Charles laid off many transporters about 6 months ago and the effect is more time off of the unit for nurses. The ED techs that are working are often assigned 1:1 continuous observation of mentally ill patients and are not a resource for general patient care. A slow moving elderly person that needs to use the restroom becomes a disaster when in the next room somebody is vomiting uncontrollably and next to them is someone who broke a hip and is in severe pain. This situation happened just yesterday and there was nobody to help. It plays out over and over every shift causing misery and suffering for all involved.

I clean rooms in between patients with barely any time to be thorough or to complete charting from the previous patient before starting again. I was recently stuck by an uncapped dirty needle that was on the floor hidden in a pile of garbage from the day before. I filed a complaint with OSHA and there were 6 citations issued for inadequate management of sharps devices. This is largely a staffing issue because everyone is spread so thin and corners are being cut continuously. There is a breakdown of fundamental processes that exist protect staff and patients. For my injury, a source patient could not be identified and I have to wait several more months before being cleared from potentially contracting Hepatitis C or B.

The job as it is, is not sustainable. Not only am I constantly making choices of who gets my care and who doesn't, but everyday feels like some kind of failure. I've made mistakes working under this pressure and so have my colleagues. We're running on empty and frequently do not

even get breaks to use the restroom or decompress for a moment. Our best is not enough to the community or to hospital management. Patient complaints feel endless. There are more tasks and rules being handed down constantly. The problems are systemic and rooted in staffing and profit motives. Most of us are working so hard - physically and emotionally - just to get through everyday working as fast as possible. It is exhausting and dehumanizing.

I believe that all of these staffing issues, not just those related to nursing, need to be addressed to improve the delivery of care for our community and alleviate some of the pressure that myself and colleagues experience daily. HB 2697 is a place to start. Limiting the number of people I am required to care for at one time would make all of this a bit more manageable. Please support this bill.

Yours in Health,

A handwritten signature in black ink, appearing to read "Harbick, RN". The signature is written in a cursive, flowing style.

Jamie Harbick, BSN RN