

Samantha Bodeen
5319 SE Hill Rd
Milwaukie, OR 97267

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RE: Testimony in Support of HB 2697

To the House of Committee on Behavioral Health and Health Care

My name is Samantha Bodeen and I am a nurse at Providence Portland Medical Center in the Emergency Department.

Our entire country is very well-aware how broken our healthcare system is. It is a system that values solely profit, not health and wellbeing. And this is felt by all. We are sick and Americans are desperate for change, a better way. The answer of how to fix our system is not clear, it is not simple. But the path to a better tomorrow starts with small change. Let that change happen here today by voting yes on this bill.

We are still losing staff every month. We are outnumbered by travelers and young nurses. We've lost a huge portion of seasoned and experienced nurses, leaving us with a vast gap in knowledge and wisdom. People are either taking travel positions or leaving to other companies that are paying a competitive wage or finding work that has a better work-life balance. The staffing situation is bleak and the workload has not improved. The hospital is at capacity with a full emergency room lobby every single day.

Providence is a mammoth of an organization, the decisions that executives make have profound trickle down effects on the public. Over the last several years as the pandemic has exacerbated the fractures and failures of our healthcare system, Providence has been provided with countless opportunities for positive change, but they have failed all of us time and time again, making it unabashedly clear what their true motives are— profit and greed. We hear phrases from administrators and managers such as “you're doing amazing work, we know it's been hard, you are so resilient, you're heroes, etc.” But Providence's actions say this: “Hey everyone, we know you can work harder, longer, and for cheaper than we ever thought before! Keep it up!”

From countless nurses who have experience at varying hospitals, we hear over and over again how unique we are at the hospital I work at, for the fact that we have such a great team. We are supportive to each other, we work very hard to give good care to our patients, and our staffing matrix allows us to get our contractual breaks, most days. And this is unique to us, unfortunately. The fact that we are a novelty is an absolute disgrace. Our supportive culture is the driving force as to why some of us, despite all the hardship, have stayed and endured. However, the culture has been breaking down over the last several years. People are becoming resentful. Exhausted. We are so desperate for staff that we can't be picky anymore. We have had to make bad hires because we need bodies so desperately. Even agency nurse qualifications continue to be simplified and expedited, resulting in incompetent agency RN's filling in the holes. Some days I look around and I see that I am the only staff nurse in my pod,

surrounded by travelers. Don't get me wrong, I am thankful they are there to step in and help with our patient load during desperate times, however, there are legitimate safety concerns to this as well. Travelers do not know our policies, they do not know who to call for help, they do not know where supplies/medications are, or how to work the equipment, and at times, more commonly than ever before, they are inexperienced and incompetent, all leading to very dangerous situations and an even increased workload for us staff nurses to pick up the slack.

So let me tell you about our staffing matrix. In our department we have four nursing "Teams" or pods and each nurse takes care of 4 rooms/patients at a time. Then for each pod of nurses there is a float nurse and an ED Tech to assist 3-4 other nurses with their assignment. The float nurse acts as a support for the whole pod and helps everyone get their breaks. This is a truly wonderful design, which is a sentiment shared by all the nurses I know. But it's only successful if all the positions are filled for the day. And when they are, the fact that I can count on getting my lunch break most days is a novelty from what I'm told from nurses who come from other facilities. This is an absolute disgrace. I want you to imagine working 12-hour days, on your feet running around for 99% of that, and then having to cram your lunch at your desk? I ask you, would you want to work there? Would you be able to care for some of the most physically and emotionally demanding types of people running on an empty stomach, with a smile on your face?

Just yesterday in fact, by 11 am we had 25 people in the lobby waiting to be seen and ambulances were flooding in. I didn't get either of my 15 minute breaks, in fact, no one in our pod had gotten our breaks, but we did end up getting portions of a lunch. There was a small window, where my float nurse hurriedly popped her head in the patient's room and said, "You can go to lunch, but you got to go now." I said "Okay I'll go as soon as I'm done starting his IV. Can you just make sure this patient gets his medications very soon? He needs them." She said she would do her best and darted off to the next room, where another critically ill patient had just arrived. I knew what that meant. She was too busy. This patient I was dealing with was a paramedic for 40 years and retired a few years ago, and shortly after going into retirement, he began battling throat cancer and was in the Emergency Department for a problem with his gastric feeding tube, constant nausea, vomiting, and pain. This poor man was miserable. He was pale, had sunken, tired eyes, and he had red painful skin peeling from his neck from the radiation. I had the choice to make. I could cut time out of my lunch to get him his medications so he could get some relief from his misery, or run off to get my full lunch break and leave him to wait for the float nurse who would likely not be back in the room for some time. Obviously, I chose to stay. When I was finished and the patient was already getting quick relief, I left for lunch. My float nurse saw I was just leaving for lunch about 20 minutes after she had told me to go originally and she snapped, "why haven't you left?!" Get out of here! Now I'm not going to get my lunch!" I reassured her, I was only going to eat quickly and be back soon to release her to her lunch break. She breathed out a sigh of relief and hurried off again.

Having this float nurse does not mean we are sitting letting other people do our work. Quite the opposite. We are plenty busy even with a float, but they ensure we get our breaks most of the time so we can come back to the floor feeling refreshed and satiated, which means we have the energy to provide better care to our patients. Our float nurse is our buoy in the storm. It's a role that we can depend on to ensure safer, better care for our patients. If this bill

does not pass, Providence will make plans to increase our patient load and take away the already sparse amount of support that we are fighting to hold on to.

Their eventual plan to give 7 patients to one nurse, an ED tech and an aide, is baffling. When it is already a daily struggle to provide adequate care to even just 4 patients, it is mind-boggling to think how it is humanly possible to care for 7. Well, It's not possible. People will get hurt. Licenses will be in jeopardy. We will have an even worse crisis on our hands. This is another opportunity to cut nursing costs in half at the expense of our safety and our patient's safety. The short-sightedness of this plan is mind-boggling.

The seasoned nurses that were at Providence when it was run by the nuns were proud to be Providence nurses. They were proud of their work and felt supported by upper management. Now, for the last 3 years we have been experiencing a mass exodus of Providence caregivers due to non-competitive wages, unsafe and overwhelming working conditions, and lack of support all around. The growing resentment is palpable and it is felt by the public and patients alike. Unhappy caregivers are undoubtedly leading to unhappy patients. Unhappy patients means less funding from the government and the cycle of penny pinching from the bottom continues. Let that corrosive cycle end here today. Let healing take place. Vote yes on this bill. Vote yes for safety, vote yes for better health outcomes for your friends and family. Vote yes for you, when you inevitably end up in the hospital someday. Change starts small but the ripple effects of this bill could be the start of healing our broken system. Let Providence lead the way for positive change for the rest of the country. Let Providence be a steward of health and innovation again, not another greedy mammoth. That story is getting old. We must hold Providence accountable to their responsibilities, to their mission statement, and to their promises.