

**Salem Health**P.O. Box 14001
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February 27, 2022

The Honorable Rob Nosse, Chair House Committee on Behavioral Health & Health Care

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Chair Nosse, Members of the Committee:

I am a registered nurse that has practiced in Oregon for the last 10 years. I'm writing to share my concerns about HB 2697.

As a Float Pool RN at Salem Health, I have the opportunity to work in many of the units at Salem Hospital. As a result, I have a unique perspective. I've had a first-hand look at the excellent care provided by medical teams in units hospital-wide.

I am also a member of my hospital's Staffing Committee, where we work with bedside staff, managers, and leadership to create the ideal staffing for patients and staff. We have a robust process to review staffing plans which are generated within each unit. Our staffing plans are built to ebb and flow with the real-time needs of the patients and the bedside nurses. Our charge nurses are instructed to then staff units based on those real-time needs. As both a charge nurse and a bedside nurse, I have seen this approach firsthand and I can testify to it working well.

In addition, all nursing departments meet together twice daily to discuss staffing needs. At these meetings, we work as a team to help staff the entire hospital safely. If one floor is overstaffed, they will float their staff member to another floor to help each department function to its full potential. If acuity, workload intensity, or patient loads change in between these two meetings, a simple phone call is all it takes to get additional staff to a unit that needs it. This is a great example of the teamwork and collaboration that happens at Salem Health.

HB 2697 has the potential to compromise the great care we provide our patients under this unique and nimble staffing model. I recently heard from a colleague who moved from California where they have mandated nursing ratios (less strict than those proposed in HB 2697). This colleague reported their workload actually decreased moving from working nights in California to working day shifts at Salem Health. Under mandated ratios, we would see decreased ancillary staff. This would potentially place our patients at risk and wouldn't allow bedside nurses to work at the top of their scope.



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We work hard at Salem Health to support our bedside staff and provide great care. I would hate for this bill to compromise the great work we do. Thank you for taking my testimony into consideration.

Sincerely,

A. Devo chauski RN

Annie Derochowski BSN, RN, PCCN