

My name is Elisa Youngman, I have been a nurse for 13 years and urge your support of Oregon House Bill 2697, as it is the only solution being offered to help the working conditions of nurses. Oregon hospitals are facing staffing shortages, including a reported nurse shortage since the start of the Covid-19 Pandemic. This shortage is not founded in the lack of Registered Nurses that exist in Oregon, but rather a shortage of nurses willing to work in the current conditions of health care, where nurses are required to care for more patients and their work is negatively impacting their mental health.

The 2020 Oregon Licensed Health Care Workforce Supply published by the Oregon Health Authority (OHA) reported that Oregon has more registered nurses (RNs) than are actually practicing. In 2020, Oregon had 59,778 holding active RN licenses, with only 45,135 actively practicing, and an estimated 25,876 full-time equivalent (FTE) providing direct patient care (OHA). Hospitals across the nation have seen an average turnover of 27.1%, with the highest turnover being nurses with less than 5 years of experience (NSI).

It almost seemed like we were heard about the impacts of the COVID-19 Pandemic on health care workers, when the American Rescue Plan Act of 2021 had action to support funding for grants for health care providers to promote mental health among their health professional workforce, however, it was another task for health care workers to save themselves. Meanwhile, nothing was being done to promote improving work conditions to reduce the mental health implications of being a health care worker. Oregon House Bill 2697 needs to be supported by all Oregon State Representatives if we have any hope of improving working conditions and attracting RNs back to the profession.

Sadly, the Hospital Association has resorted to fear mongering in regard to the passing of HB2697. To be clear, it will not remove available beds or health care accessibility for Oregonians, rather it will ensure that hospitals will hire enough nurses to safely care for already very full hospitals in Oregon.

Many of my peers have shared the increased acuity and intensity of our patients over the last few years, the lack of breaks due to hospitals not staffing adequately, and the general feeling that OHA has let us and our communities down by not holding our institutions accountable to safe staffing levels. The negative ramifications of short staffing goes beyond the care of patients admitted to the hospital, as threshold for admitting a patient has increased, patients are discharged home much sooner, and many Oregonians are receiving care from their homes.

Many nurses are not covered under the current Staffing Law and are vital to the care of Oregonians. Transplant and device coordinators, call center nurses, and care management, who are at the beck and call of patients all over Oregon via MyChart and telephone. Nurses who do not get much time away for vacations and sick days, because there is no one else to cover their work responsibilities. They return to even more work, as well as the devastating realities of not having someone to cover their

workload. These nurses help prevent our hospitals from being overwhelmed with patients.

Devan Matkin was the only Pediatric Renal Transplant Nurse Coordinator in the state of Oregon. As her patient load grew, she reported to her manager and the physician's she worked with that it was too much for just one person to do. It took a long time to get FTE approval for a second nurse to share the work load with Devan, but the role was still left vacant on January 17th, the day she died by suicide. Devan had shared the impact of her work stress with her colleagues, family, and friends, all of whom were powerless to help her. Even the day prior she had stated "my job is hard and isolating."

Devan is the 2nd nurse to die of suicide in the last 14 months, and the 3rd I have known since working in my current job. Devan, like many nurses was feeling moral distress and that work had a great impact on her mental health. She would have been 32 on February 28th, the day I am sharing my testimony with Oregon State Representatives.

In 2021 a study showed that suicide risk compared to the general population was significantly increased for nurses. Research shows that professional stressors, assignment of non-nursing work, societal and structural threats are the predominant factors in nurse death by suicide.

Just two years after California implemented mandated staffing ratios, workloads were significantly lower than other states and nurse burnout decreased. Yet beyond that, California hospitals experienced a change in their workforce that improved skill mix and resulted in better patient outcomes. Improved staffing would improve working conditions, the challenges in equitable workloads, adequate physical and human resources, and burnout, as well as the burden of not being able to provide good care to our patients.

I implore you to consider the future of Oregon as you make this decision. As staffing currently stands in Oregon hospitals, every nurse is hoping their loved ones do not have to enter a hospital for care, as we know there is nothing in place to ensure they are safely staffed.

## Supporting Documents:

1. OHA (2021). 2020 Oregon's Licensed Health Care Workforce Supply. <https://www.oregon.gov/oha/HPA/ANALYTICS/HealthCareWorkforceReporting/2021-Workforce-Supply-for-web.pdf>
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<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8047773/>
3. Lee K, Friese C. (2021). Deaths by Suicide among Registered Nurses: A Rapid Response Call. *J Psychosoc Nurs Ment Health Serv*. 2021 Aug; 59(8): 3–4.  
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4. L.Aiken, D.Sloane, J.Cimiotti, S.Clarke, L.Flunn, J. Seago, J. Spetz, & H.Smith. (2010). Implications of the California Nurse Staffing Mandate for Other States. [Health Serv Res](#). 2010 Aug; 45(4): 904–921. doi: 10.1111/j.1475-6773.2010.01114.x. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2908200/>
5. Kunz M, Strasser M, & Hasan A. (2021). Impact of the coronavirus disease 2019 pandemic on healthcare workers. *Current Opinion in Psychiatry, Publish Ah*. 10.1097/YCO.0000000000000721
6. L.Porter, A.Koch. (2023). New Oregon House bill aims to improve hospital staffing crisis. KGW8 Straight Talk. January 6, 2023.  
<https://www.kgw.com/article/entertainment/television/programs/straight-talk/nurses-hope-house-bill-2697-help-hospital-staffing-crisis/283-67741d72-d996-40a5-a9a9-ea1e2c49b9f8>
7. NSI Nursing Solutions. (2022). @022 NSI National Health Care Retention & RN Staffing Report. [https://www.nsinursingsolutions.com/Documents/Library/NSI National Health Care Retention Report.pdf](https://www.nsinursingsolutions.com/Documents/Library/NSI%20National%20Health%20Care%20Retention%20Report.pdf)