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On Behalf Of: Oregon Nurse
Committee: House Committee On Behavioral Health and Health Care
Measure: HB2697

In the years when the department I work in did not have a state required nursing staffing committee staffing plan approved, I had many occasions as charge nurse when I was staffing a room like so: I was an Operating Room circulator, another nurse and tech were staffing a nurse sedation room, another nurse is sedating a bronchoscopy, and another nurse and tech team were staffing emergent cases off the unit in the OR. This leaves a nonclinical unit coordinator as the only out-of-room resource for an emergency. We would do this without break relief, as that was usually the responsibility of the charge nurse. On days where bronchoscopies were not staffed, several nurses and techs would not get any breaks or lunches until after 2 PM.

While we can make do to make sure patient care comes first, what we cannot tolerate is sustained effort from employers to provide less than the minimum for breaks and lunches set by Bureau of Labor and Industry (BOLI) standards. Staff should get a rest break in the first 4 hours of their shift, after that they get a lunch break before 7 hours into their shift. Variances from this state law specifically target nurses to make it easier for hospitals to provide minimum staffing and is an unacceptable labor practice. It ultimately leads to fatigue, burnout, and unsafe patient care conditions. I'd like to remind each and everyone of us, healthcare leadership included, that we are all patients of Oregon's healthcare system. An unsafe and understaffed hospital may look good on a balance sheet today, but will be frustrating when each of us ultimately encounters barriers to receiving healthcare in the future. - RN in Portland