Written Testimony in Support of SB693 Submitted by: Jennifer Atkisson RNC-OB, MSN, CNL Position: Nurse; Clinical Educator; Legislative Coordinator for AWHONN, Oregon Affiliation: Providence Willamette Falls Medical Center

Dear Chair Reynolds and Members of the Senate Committee on Early Childhood and Behavioral Health,

Thank you for the opportunity to provide testimony in support of SB 693, which aims to establish a task force on the perinatal workforce in Oregon.

My name is Jennifer Atkisson, and I have been a committed labor, delivery, postpartum, and nursery nurse since 2007, and am currently working as a staff nurse at Providence Willamette Falls Medical Center. I'm also a clinical educator specializing in fetal monitoring and obstetric patient safety for AWHONN. In this role I bring education to obstetric units in small hospitals in eastern Oregon, the Willamette Valley, and the Oregon Coast who struggle to attract not only staff, but educators whose job it is to train and maintain the competency of staff. So it is this perspective that brings me to support SB 693

Hospitalization for labor, birth, and postpartum is the most concentrated, activity-intense part of the childbirth continuum and most people in labor require 1:1 nursing care. Childbirth, including its complications, remains the most common reason for hospitalization and cesarean section is the most common surgery in the U.S.

We are experiencing a nursing shortage and the challenges we face in training nurses new to our specialty have never been more daunting. When I began my tenure at Willamette Falls in 2012, I was the youngest and least experienced nurse on the team, with 5 years experience. At that time, the unit was staffed by seasoned nurses who had dedicated their careers to our hospital and planned to retire here. This stability was a cornerstone of our ability to provide consistent, quality care.

Today, the landscape has drastically changed. The turnover rate has increased including retirements, and I find myself working with a majority of staff who are brand new to the field. The rapid turnover places immense pressure on the existing staff to continually train and orient new nurses while managing our own critical duties. Training a nurse to Labor & Delivery is time intensive, taking about 16 weeks to be passably competent. Then they are closely supervised for approximately one year when they move beyond the novice stage. Training issues are particularly acute in community, rural, and critical access hospitals, where the training may take longer due to lower volumes of patients and relies on a preceptor model of seasoned nurses.

Workforce challenges also ripple across other OB units. In recent years, there has been a shift in reasons for hospital diversions and highlights a critical vulnerability in our healthcare system. Where I once saw diversions as a rare event tied to bed capacity, we now face situations where it is primarily the availability of labor-trained nurses that dictates our ability to provide timely and effective care. With increasing frequency, all units in an area will be on divert, which means that we must accept patients, no matter how unsafely we are staffed.

This is causing a worsening of the nursing workforce situation, as recent surveys now indicate that perinatal nurses are among the least satisfied nursing specialties. There was once a waitlist to get a job on a labor unit, but that is a thing of the past. This spirals into further staff shortages, increasing the strain on remaining staff and affecting overall patient care quality.

The establishment of the Task Force on the Perinatal Workforce, as proposed in SB 693, is a critical step towards addressing these challenges. The task force's mandate to evaluate the current workforce and develop recommendations for its improvement is crucial for enhancing the support and training available to perinatal healthcare providers across the state.

I urge you to support SB 693 to help ensure that all communities in Oregon have access to well-trained and adequately supported perinatal healthcare professionals. By doing so, we will be investing in the health and safety of our mothers and babies, and in the future of our state's healthcare system.

Thank you for considering my testimony. I am committed to supporting this bill and am available to provide further information or clarification as needed.

Sincerely,

Jennifer Atkisson MSN, RNC-OB, CNL

6503 SE 40th Ave

Portland, OR 97202