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On Behalf Of:

Committee: House Committee On Health Care

Measure, Appointment or Topic: HB4074

HB 4074 – Opposing Testimony

I am a Registered Nurse working on a Neuroscience Medical-Surgical unit at OHSU in the Portland metropolitan area. I strongly oppose HB 4074 and any amendment that would increase nurse-to-patient ratios from 1:4 to 1:5 in the med/surg setting.

Neuroscience med/surg patients are not “standard” medical-surgical patients. On any given shift, nurses are caring for patients recovering from craniotomies, spinal surgeries, shunt revisions, and complex neurological procedures, alongside patients with acute strokes, traumatic brain injuries, seizures, brain tumors, and altered mental status. These patients require frequent neurological assessments, rapid recognition of subtle changes, and timely communication with providers to prevent irreversible harm.

Neurological deterioration can occur suddenly and without warning. A small change in pupil response, level of consciousness, speech, or motor function may be the first indicator of a life-threatening complication. Increasing assignments to five patients significantly reduces the time a nurse can spend performing thorough assessments and responding appropriately. Delayed recognition in neuro patients can result in permanent disability or death.

In addition to the acuity of care, many neuroscience patients require extensive assistance with mobility, hygiene, feeding, and toileting due to weakness, paralysis, confusion, or cognitive impairment. They are at high risk for falls, aspiration, skin breakdown, and hospital-acquired complications. Adequate staffing is essential to maintain patient dignity, safety, and basic standards of care.

Since the implementation of safe staffing laws, I have personally seen improvements in patient safety, continuity of care, and nurse retention. Manageable assignments allow nurses to provide meaningful patient education, collaborate effectively with interdisciplinary teams, and support new nurses entering the profession. Increasing ratios would undermine these gains and contribute to burnout, moral distress, and turnover—further worsening staffing shortages.

Nurses are not interchangeable task-doers; we are critical safety monitors in a highly complex and unpredictable environment. Expanding assignments to 1:5 places patients, nurses, and the healthcare system at risk and compromises the quality of care Oregonians deserve.

For these reasons, I strongly oppose HB 4074 and urge the committee to protect current staffing standards and prioritize patient safety and nurse wellbeing.