

Submitter: Lisa Melendez  
On Behalf Of:  
Committee: House Committee On Health Care  
Measure, Appointment or Topic: HB4074  
Chair Nosse, Vice Chairs Nelson and Diehl, and Members of the Committee:

For the record, my name is Lisa Melendez. I am a registered nurse and have worked as a nurse for 36 years, including the past 26 years in Labor & Delivery at Kaiser Sunnyside Medical Center. I am a member of OFNHP and am writing in strong opposition to HB 4074.

Every day, I provide direct patient care to mothers and newborns during some of the most critical and vulnerable moments of their lives. The nurse staffing law passed in 2023 has begun to make a real difference in our ability to provide safe, attentive care. For the first time in years, we are seeing movement toward adequate staffing and being able to take legally required breaks. These changes directly affect patient safety, nurse retention, and the quality of care families receive.

HB 4074 would weaken enforcement of the staffing law, delay penalties for non-compliance, and allow minimum ratios to replace comprehensive staffing plans. In Labor & Delivery, this approach is dangerous. Our patients' needs change rapidly—emergencies happen without warning, and safe care depends on staffing that reflects acuity, not just a number on paper. A “bare minimum” ratio does not account for high-risk patients, emergency cesarean deliveries, hemorrhages, or the need for continuous monitoring and support.

The current law was the result of years of work and collaboration. Weakening it now would undermine progress before hospitals are fully held accountable for implementing safe staffing plans. Hospitals have had time to prepare. Delaying enforcement and capping penalties sends the message that compliance is optional and that patient safety can wait.

From my experience on the front lines, the barriers to passing staffing plans are not due to the law itself, but to delays, resistance, and lack of urgency from hospital systems. When staffing is inadequate, nurses are forced to stretch beyond safe limits, breaks are missed, and patients receive less attention during critical moments. That is not acceptable for the families we serve.

The improvements we are finally beginning to see—including lawful breaks and movement toward safer assignments—are the result of HB 2697. Weakening enforcement now risks reversing that progress and returning to unsafe conditions that contribute to burnout, turnover, and preventable harm.

For these reasons, I respectfully urge you to oppose HB 4074 as currently written and protect the integrity and enforcement of Oregon's nurse staffing law.

Thank you for your time and consideration.

Sincerely,  
Lisa Melendez, RN  
Labor & Delivery Nurse  
Kaiser Sunnyside Medical Center  
OFNHP Member