

## Seiler, Erin

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**From:** Hartley, Kristin A :LMP Nurse Manager <KHARTLEY@LHS.ORG>  
**Sent:** Friday, May 21, 2021 5:00 PM  
**To:** Seiler, Erin  
**Cc:** dmeyer@oahhs.org  
**Subject:** Petition for Rulemaking on OAR 839-020-0050

May 21, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am a nurse leader at Legacy Meridian Park Medical Center which serves Tualatin and the South metropolitan area and I oversee Medical Specialties which provides care for inpatients who have a myriad of medical conditions including COVID 19. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are not represented by a union. BOLI's rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break so early in the shift when they prefer a meal break later.

Our shifts begin at 0700 and 1900. The first four hours of a shift include assessments, medication passes, wound care, interdisciplinary care collaboration and for night shift, settling patients in so they may rest. Though meal breaks are essential. Complying with the current schedule causes additional stress and may detract from patient care, especially in this unpredictable environment,

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,  
Kristin Hartley,  
Legacy Meridian Park Medical Center  
[Khartley@lhs.org](mailto:Khartley@lhs.org)  
503-692-2197

**Kristin Hartley MSN, RN | Manager Medical Specialties | Legacy Meridian Park Medical Center**  
19300 SW 65<sup>th</sup> Ave. | Tualatin, OR 97062 | P:503- 692-2197 | F: 503-692-7341

May 21, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am a nurse leader at Legacy Mount Hood Medical Center which serves Eastern Multnomah and Clackamas Counties. I oversee the Emergency Department which care for patients seeking emergency medical care. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are not represented by a union. BOLLs rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break early in their shift. Many of our staff have expressed frustration that they would prefer the option for having their meal break later in their shift. We are advocating to have the flexibility to meet the needs of our staff as they have expressed them.

Our standard day shift starts at 06:30, the current rule requires we complete all day shift RN lunches by 12:30pm. At this time of day, we also start to see an increase in patients arriving to the department. Having to send all of our nurses to lunch by the 6<sup>th</sup> hour time frame to meet the OAR requirement limits our ability to have sufficient nursing resources available to care for patients. With our sickest patients it is often safest for us to provide continuity of patient care, to maintain the same RN assigned to the patient, especially during critical procedures like stroke care. Having to meet the 6<sup>th</sup> hour rule makes challenging to meet our patient's needs. Having greater flexibility in when we send nurses to lunch would allow us to have more adequate nursing resources to care for patients safely.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements more than if they worked in non-healthcare positions.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,  
Erin Carr  
Nurse Manager, Legacy Mount Hood Medical Center  
24800 SE Stark Street  
Gresham, OR 97030  
503-674-1338

**Seiler, Erin**

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**From:** Jennifer Pierce <jepierce@samhealth.org>  
**Sent:** Friday, May 21, 2021 4:42 PM  
**To:** Seiler, Erin; dmeyer@oahhs.org; aeaston@oahhs.org  
**Subject:** Petition for Rulemaking on OAR 839-020-0050

May 21, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am a Nurse Manager at Samaritan North Lincoln Hospital which serves Lincoln City and the surrounding area. I manage the House Supervisors, The Family Birthing Center and the Entry Screeners. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. BOLLs rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break so early in the shift when they prefer a meal break later.

The rigidity of the rules is very difficult for the nurses in the Family Birthing Center as the ebb and flow of labor and delivery does not follow any type of schedule, babies come when babies want to come. For example, just yesterday, at beginning of the scheduled break times, we were caring for two women who were both getting ready to have their babies and we had no time to be sending a nurse to break, our patients needed us. We have a very small staff and we had no way of relieving someone of their duty to go to break, all staff were needed to care for our patients. The staff need to have some flexibility in determining when they go and how they take their meal and rest breaks, especially when our patient care varies so much in maternity.

The requirement for scheduling meal and rest periods under the current regulations does not allow for staff to have the necessary flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions. Health care is not an office job where they can pause their work and leave for a set and scheduled period. Giving the nursing professionals the option and flexibility to take their breaks at other times, also will give staff greater satisfaction.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,  
Jen Pierce BSN, RN  
Nurse Manager, Samaritan North Lincoln Hospital  
[JePierce@samhealth.org](mailto:JePierce@samhealth.org)  
541-996-7381

May 21, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am a nurse leader at Salem Health which serves Salem and the surrounding communities. I oversee the Division of Adult Health Services which cares for adult inpatients with multiple diagnosis and levels of care. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are not represented by a union and should not be limited opportunities do to that fact. BOLLs rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take 3 separate breaks and one meal break requiring a total of 4 patient hand-offs. For anyone who works in healthcare, they know every patient hand-off is a risk point for patient safety and should be minimized if at all possible. Staff recognize this risk and would like to minimize hand-offs, but current rules do not afford them the opportunity to put patient safety first.

In the Nursing Code of Ethics, patient safety is held by the nursing profession and to meet this obligation nurses need to take care of themselves. Allowing the employee the flexibility of combining a meal and a rest break affords them time to actually eat and rest, especially in a 12-hour shift. For hands-on physical work, such as nursing, having the time to put your feet up for 15 minutes after eating a meal can be therapeutic and rejuvenating. Not having this as an option, due to the current ruling, creates an inability for staff to self-regulate and needs to be open for discussion and revision.

Lastly, the requirement for scheduling meal and rest periods under the current regulations does not allow decision making for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care settings. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions. Again, another inequity to those we call our healthcare heroes.

Thank you for your reviewing of our feedback and for consideration of opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,

Marge A. Willis, DNP RN NEA-BC CCRN-K  
Director of Adult Health Services, Salem Health  
Marge.Willis@Salemhealth.org



2500 NE Neff Road  
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May 21, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am a nurse leader at St. Charles Bend, a Level II trauma center that serves Central and Eastern Oregon, and I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At St. Charles, nurses at some of our hospital campuses are represented by the Oregon Nurses Association (ONA.) BOLIs' rules need to be equal for all caregivers and this proposed change would ensure such restrictions are not imposed on caregivers solely based on if they are unionized.

All caregivers need break times throughout the day and providing flexibility in how they schedule it is key. Under the current schedule, for a 12-hour shift, our care teams are required to take a meal break early in the shift when they would prefer a meal break later. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, caregivers are more burdened by the meal and rest period requirements than if they worked in non-health care positions.

We respect all caregivers as professionals and know that they want to take their meal break when it fits best for them. If adopted, this regulatory change would allow all health care settings to adopt policies that allow for more flexibility in when to schedule these breaks, as well as be more responsive to the care teams' and patients' needs.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all caregivers and better serve our workforces needs as they support our patients.

Thank you,

Debbie Robinson  
Chief Nursing Officer  
St. Charles Bend

May 20, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am a nurse leader at Legacy Meridian Park Medical Center which serves the Willamette Region and I oversee the Cardiovascular Catheterization Lab and Endoscopy Suite which care for Cardiac, Neurological, and Gastrological patients. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are not represented by a union. BOLI's rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 10- and 12-hour shift, our care team is required to take a meal break so early in the shift when they prefer a meal break later.

For example, both departments begin at 0700. In the Cardiovascular Lab, the team is made up of four (4) specific roles. They must all be relieved for a 15-minute break within the first 4 hours and a full 30-minute lunch before 12:30pm to meet the requirement. If you have two (2) staff members breaking a team of 4, they both must get their breaks and lunches in within the same amount of time. For one relief person to relieve two members, it takes a total of forty-five (45 minutes) within the first 4 hours and ninety minutes (90) within the first five hours and thirty minutes.

In the Cardiovascular Lab, sterility is a factor. With increased bodies walking in and out of the room, this increases the risk for infection. Also, the Cardiovascular Lab is always on the ready to care for heart attack and stroke victims. These cases are not planned and may present themselves at any time making it difficult to schedule breaks and meal period at set times.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,  
Mandi Wall, MSN, RN, CPAN  
Endoscopy and Cardiovascular Lab Manager  
Legacy Meridian Park Medical Center

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,  
Mandi Wall, MSN, RN, CPAN  
Endoscopy and Cardiovascular Lab Manager  
Legacy Meridian Park Medical Center  
(503) 692-2260  
alwall@lhs.org

## Seiler, Erin

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**From:** Valdez, Sherri D :LMP Nurse Manager <SVALDEZ@LHS.ORG>  
**Sent:** Friday, May 21, 2021 2:44 PM  
**To:** Seiler, Erin  
**Cc:** dmeyer@oahhs.org  
**Subject:** Petition for Rulemaking on OAR839-020-0050: Meal and Rest Periods

Commissioner Val Hoyle,

I am a nurse leader at Legacy Meridian Park Medical Center in Tualatin, Oregon. I oversee the Operating Room and the Recovery Unit. I am writing you today in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks.

At my hospital, our nurses are not unionized. BOLLs rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for autonomy of healthcare. Healthcare requires flexibility because our patients aren't the same. Healthcare providers need to be able to respond to the needs of the patient and have the autonomy to decide if it is better patient care to wait to take a break or lunch during critical circumstances. If you were a patient having surgery and something wasn't going as expected, wouldn't you want your surgical team to remain intact to ensure seamless care versus making a break or lunch priority over your care?

The regulations are not designed with healthcare in mind or for the longer 12 hour shifts which are common in healthcare.

Be assured, we want our staff to have their breaks and meal periods. Taking care of our staff allows better patient care and happy staff but we should have the ability to determine, in the moment, when it is safe to leave the patient and when it is better to stay. Patients pay the consequences when we aren't able to give our best.

Thank you for your consideration,

*Sherri Valdez, RN, BSN, iRNPA  
Manager Surgical Services  
Legacy Meridian Park Medical Center  
19300 S.W. 65<sup>th</sup> Avenue  
Tualatin, OR 97062*



## Seiler, Erin

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**From:** Ginny Moyer <gigimoyer@icloud.com>  
**Sent:** Friday, May 21, 2021 2:08 PM  
**To:** Seiler, Erin  
**Subject:** Law regarding breaks for nurses.

I am an FBC nurse at Legacy health. I'd like to ask you to please revise your break requirements for hospital nurses. I work 12 hour shifts from 6:00AM to 6:30PM, not 7-7:30 like many units do. We are currently required to take our 30min lunch break by 12:30PM, meaning we must start our lunch breaks by 11 or 11:30 for everyone to have lunch by 12:30. This is a very busy time for us because we are getting our patients discharged around that time. On a personal level, I have always been a big breakfast eater usually eating mid morning. My normal time to eat lunch is mid afternoon. That's when I get hungry. It's difficult to be forced to go to lunch before I feel like eating. Lunch by 12:30PM makes for a very long afternoon when we don't get off until 6:30PM. It seems this law may have been written for 8 hour shifts. Please review and revise this law. It's difficult enough being a nurse these days. We need and want more flexibility with when we eat!

Thank you  
Ginny Moyer RN  
Legacy Mt Hood FBC

## Seiler, Erin

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**From:** Kristen A. Myers <Kristen.Myers@salemhealth.org>  
**Sent:** Friday, May 21, 2021 2:01 PM  
**To:** Seiler, Erin  
**Cc:** dmeyer@oahhs.org; aeaston@oahhs.org  
**Subject:** Petition for Rulemaking on OAR 839-020-0050

I am a nurse leader at Salem Hospital which serves Salem and surrounding communities. I am responsible for the Surgical Services division which includes departments that provide care to patients who are having surgical procedures and includes Pre Surgical Screening, Prep/Recovery, Operating Room, Endoscopy lab, and post anesthesia care.

I support the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are not represented by a collective bargaining unit. BOLLs rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Many of our team members work 10 hour shifts as well as 12 hour shifts and some start their shift as early as 5:30 in the morning. Under the current schedule, they must complete their meal break before 11:30. Many of the team prefers to have a snack during a break earlier in their shift and take their meal break later. The requirements around when meal breaks need to be taken also mean that if a staff member is supporting a surgical case and they need to take a meal break to be in compliance with the law, they must be relieved from their duties during that surgery. This is disruptive to the flow of surgery and surgeons often express dissatisfaction that there was a staff change during the case. Staff change over during surgical cases is a patient safety risk because it requires another count and a handoff of the patient's care to another person. Each handoff creates a potential for miscommunication which can negatively impact the patient's safety.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are more burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thanks,

**Kristen Myers, MBA, BSN, RN, NE-BC**  
Director Surgical Services

**SALEM HEALTH**  
**Hospital & Clinics**  
[Kristen.Myers@salemhealth.org](mailto:Kristen.Myers@salemhealth.org)  
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## Seiler, Erin

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**From:** Crunk, Amy W <Amy.Crunk@providence.org>  
**Sent:** Friday, May 21, 2021 1:56 PM  
**To:** Seiler, Erin  
**Subject:** Petition for Rulemaking OAR 839-020-0050

To Whom It May Concern:

As an RN Care Manager in the acute hospital setting, the current rigid rules re: timing of breaks and meals is incredibly difficult to manage in the fluid work of hospital discharge planning. The current time constraints interfere with the ability to effectively meet the needs of our patient, families, and community partners. Would highly recommend that the guidelines for timing of breaks and meals be liberalized in order for us to more effectively serve the needs of our patients. It would be sufficient for us to just know that during our 8-hour shift we are to take 2 – 15 minute breaks and one 30 minute meal break to be taken at any time during our shift, and could be taken as a single 1-hour unit.

Thanks so much for your consideration.

***Amy Crunk RNCM, BSN, ACM-RN***  
***503-215-5971***  
Providence Portland Medical Center  
[4805 NE Glisan St | Portland, OR 97213](#)

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May 21, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

On behalf of Oregon's community hospitals and the patients they serve, the Oregon Association of Hospitals and Health Systems (OAHS) appreciates this chance to provide comments in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. Hospitals balance meal and rest breaks for all of their employees and there needs to be equality and fairness for the non-unionized nurses and the non-nursing staff. BOLI's rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are not unionized.

Patient safety is the top priority for hospitals and the staff that care for them. In real practice nurses rarely leave their patient until critical issues are resolved, regardless of scheduled lunch and breaks. To allow/provide/honor staff choice when they take their lunch and rest breaks is extremely important for patient safety and staff wellness.

The current meal and rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, care teams are required to take a meal break so early in the shift when they prefer a meal break later. The meal and rest break schedule as currently laid out in BOLI rules is designed around a typical 8-hour shift and does not allow flexibility for longer shifts. The current design also does not allow for the combining a rest break with a meal break. The length of time and when lunch and meal breaks are taken should better reflect a hospital's dynamic schedules and needs as well as reflect the discretion of the professional healthcare providers/employees.

To ensure employee wellness all employees need break times throughout the day, but we recognize that flexibility in how breaks are scheduled is key. We respect all Oregon hospital and health care employees as professionals and know that they want to take the meal break when it fits best for them. If adopted, this regulatory change would allow healthcare settings to adopt policies that allow more flexibility in when to schedule these breaks. And be more responsive to the care teams needs as well as patient's needs.

The change in rules will allow a hospital to work with their staff to design a hospital policy that would increase meal and rest break compliance as the policy would be in place to support the needs and desires of timing and duration of meals and breaks. Current OAR timing for meal and rest breaks would be the floor for which a hospital policy may go above and beyond to create greater flexibility and alignment with the needs of staff and patients.

Thank you for your reviewing our feedback, OAHHS thinks it is critical for BOLI to open their meal and rest break rules to ensure equality for employees. Oregon and hospitals should continue to identify ways to better serve our workforces needs as they support our patients.

Thank you,



Andi Easton  
Vice President of Government Affairs  
Oregon Association of Hospitals and Health Systems

## Seiler, Erin

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**From:** Stibal, Mel :LMP VP Chief Nursing Officer <MSTIBAL@LHS.ORG>  
**Sent:** Friday, May 21, 2021 1:04 PM  
**To:** Seiler, Erin  
**Cc:** Danielle Meyer, OAHHS  
**Subject:** Petition for Rulemaking on OAR 839-020-0050

Commissioner Val Hoyle and interested parties,

I am the Chief Nursing Officer which oversees all patient care in my facility as well as clinical and ancillary areas. Our facility serves the south Portland metro area and reaches as far south as Silverton/Woodburn area. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our staff is not represented by a collective bargaining agreement/Union. BOLLs rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break so early in the shift when they prefer a meal break later, or when taking a meal break interrupts patient care. For many of our staff who start at 6:30 or 7am, their meal breaks begin at 10:30 am.

Providers often make patient rounds during this time which can stand in the way of streamlined communication between all providers/staff. Imagine being in the middle of assisting with a patient exam, or procedure and having to change out members of the care team to meet the scheduling requirement for meals/breaks.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,

*Mel*

**Melinda Stibal, MSN, MBA**

**Vice President / Chief Nursing Officer**

**Legacy Meridian Park Medical Center | 503-692-2620 | [mstibal@lhs.org](mailto:mstibal@lhs.org)**

**Seiler, Erin**

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**From:** Dashiell, Lisa C <Lisa.Dashiell@providence.org>  
**Sent:** Friday, May 21, 2021 12:49 PM  
**To:** Seiler, Erin  
**Subject:** Scheduled Meals and Breaks

*Re: Petition for Rulemaking OAR 839-020-0050.*

To Whom It May Concern:

As an RN Care Manager in the acute hospital setting, the current rigid rules re: timing of breaks and meals is incredibly difficult to manage in the fluid work of hospital discharge planning. The current time constraints interfere with the ability to effectively meet the needs of our patient, families, and community partners. Would highly recommend that the guidelines for timing of breaks and meals be liberalized in order for us to more effectively serve the needs of our patients. It would be sufficient for us to just know that during our 8-hour shift we are to take 2 – 15 minute breaks and one 30 minute meal break to be taken at any time during our shift, and could be taken as a single 1-hour unit.

Thanks so much for your consideration.

Lisa Dashiell, RN Care Manager  
Providence Portland Medical Center  
503-215-6160 

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## Seiler, Erin

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**From:** Mills, Astin M :LMP Med Surg ICU <AMMILLS@LHS.ORG>  
**Sent:** Friday, May 21, 2021 10:08 AM  
**To:** Seiler, Erin  
**Subject:** Lunchbreak autonomy - a comment on proposed rule for change for meal period regulations OAR 839-020-0050

Hi Erin,

While I am grateful there is a regulatory body that can put pressure on my employer to ensure adequate lunch relief support, I'm not a fan of how that regulatory body has defined when/how my lunches should be taken. Rarely am I ever in the mood to eat between the 3rd and 6th hour of my work shift. Even if I am, I'd rather have the flexibility to eat for 5 minutes and then take a more proper break later in the shift. Bottom line - this rule has unintended consequences.

I fully support this amendment and look forward to having flexibility back in how I manage my workflow and meal periods.

Astin Mills, BSN, RN, CCRN  
Critical Response Nurse  
Legacy Meridian Park  
personal cell: (503) 545-1892



May 20, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am a nursing manager at OHSU Adventist Health Portland, which serves a large population in northeastern Portland and I oversee the Intensive Care Unit, which cares for all critically ill patients, including both COVID+ and non-COVID patients. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are not represented by a union. BOLI's rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

*(Non-ONA)*

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break so early in the shift when they prefer a meal break later.

Because of this, my nurses (who work from 0645-1915) must take their meal breaks between 0945 and 1245. It is incredibly difficult to convince anyone to take their lunch break starting at 0945 in the morning, knowing they need to work until after 7pm. The current rules for meal periods also significantly interrupt some of the most critical times when changes are being made to patients' plans of care. At times, attempting to get a nurse to take a break at these times can come at the cost of patient safety.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

*(ONA Represented)*

All employees need break times throughout the day, but we recognize that flexibility in how they schedule it is key. We respect all Oregon hospital and health care employees as professionals and know that they want to take the meal break when it fits best for them. If adopted, this regulatory change would allow all healthcare settings to adopt policies that allow for more flexibility in when to schedule these breaks. And be more responsive to the care teams' needs as well as patients' needs.

Staff would be able to take breaks at the times they wish, rather than a specified and dictated time. These times for breaks would better align with a normal meal schedule, rather than attempting to eat lunch at 0945 in the morning. This would also allow nurses the flexibility to take their lunch breaks around the times when patient care will not be compromised.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,

Jeff Simafranca, MSN, RN  
Manager, Intensive Care Unit  
simafrjk@ah.org

**Seiler, Erin**

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**From:** Albert, Nicole M :LMP Medical Specialties <nalbert@lhs.org>  
**Sent:** Thursday, May 20, 2021 10:13 PM  
**To:** Seiler, Erin  
**Subject:** Petition for Rulemaking on OAR 839-020-0050

Hello there,

My name is Nicole Albert. I am a nurse for Legacy Meridian Park hospital writing in reference to changing the current laws regarding lunch breaks for patient care staff. In an inpatient setting, our jobs are fairly unpredictable. We cannot stop patient care because it is our allotted break time. I am primarily a charge RN on night shift. Our unit typically has 9-10 RNs on noc shift and 3 CNAs. Including my own break period (which ideally I would take at 2230, a mere 4 hours into my shift and after have 8 to go) I need to make sure that the remaining 12-13 staff members take their breaks from 2300-0100. Our units are all separate from each other in pods. One is 2 floors above the other 2. Sometimes we have a 4th overflow unit open. This time period is also a common time for admissions to arrive from the ER. I understand the need to ensure staff take their breaks. But this is such a narrow window to take breaks. Having to take a lunch break and come back with 8 hours left in a shift is also a big complaint from staff. The time schedule simply doesn't make logistical sense for 12 hour shifts. I am hoping that many of my colleagues have also emailed about this issue as it has been a constant source of stress for staff. Especially amidst what hospital staff have endured in the last year+ due to Covid. It would be one less thing to worry about. Thank you so much for your time in reading this email.

Sincerely,  
Nicole Albert BSN RN

May 20, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am Jeanine Stacey a Nurse Manager at Adventist Health - Tillamook which serves the 80-mile-wide rural community of Tillamook County. I oversee Med/Surg and ICU which care for critically ill patients, medical patients such as those suffering from heart failure. As well as scheduled elective surgery patients and those having emergent surgery. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are not represented by a union. BOLLs rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break so early in the shift when they prefer a meal break later.

My nurses and support staff work 12 hr. shifts from 0645-1915 and/or 1845-0715. The law as it sits now, requires my staff to begin lunches at 11 and complete them by 1pm. This is prime time for the bulk of discharges to occur and when our surgical patients are being admitted from the recovery room. It is difficult to facilitate lunches when these hand offs are occurring during the most important parts of a patient hospital stay. Hand-offs are high risk times for patient safety, and to be asking our staff to do this during an admission, or during a challenging discharge puts our patients at great risk.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements more than if they worked in non-healthcare positions.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,  
Jeanine Stacey  
Clinical Nurse Manager | Adventist Health Tillamook  
Phone (503) 815-2347  
[staceyje@ah.org](mailto:staceyje@ah.org)



2865 Daggett Avenue  
Klamath Falls, OR 97601  
Ph 541 882 6311

SkyLakes.org

Paul R. Stewart  
President & CEO

May 20, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am the Director of Human Resources at Sky Lakes Medical Center in Klamath Falls Oregon. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are represented by the Oregon Nurses Association Union. BOLIs rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

All employees need break times throughout the day, but we recognize that flexibility in how they schedule it is key. We respect all Oregon hospital and health care employees as professionals and know that they want to take the meal break when it fits best for them. If adopted, this regulatory change would allow all healthcare settings to adopt policies that allow for more flexibility in when to schedule these breaks. And be more responsive to the care teams needs as well as patients needs.

We take care of patients throughout the day and sometimes disruption occurs, trauma, high census COVID-19 etc. and the flexibility would assist us in taking care of our patients and our employee's needs.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,

Alan E. Caldwell  
Director of Human Resources  
Sky Lakes Medical Center  
2865 Daggett St.  
Klamath Falls, Or. 97601

## Seiler, Erin

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**From:** Strick,Lora <StrickLA@ah.org>  
**Sent:** Thursday, May 20, 2021 7:03 PM  
**To:** Seiler, Erin  
**Subject:** Re: petition for rule making on OAR 839-020-0050

Thank you for taking feedback on this policy.

I have worked 12-hour shifts for 20 years. There are many reasons which make it unsafe for our patients and impossible logistically to take a 30 minute break within the first 6 hours. I have up to 6 nurses working the floor with me, as the charge nurse. In order to get the nurses off the unit 1 at a time, I would need to start at 1000 getting lunches done. This would mean that there is still overlap (leaving unsafe staffing coverage on the unit). The break times, including myself as the charge nurse would be 1000-1030-1100-1130-1200-1230 with one person overlapping somewhere there. The person with the 1000 break would then be on the floor until 1900 which is 9 more hours! Is this what you intended? I do not think so. I think that someone is applying a policy to 12-hour shift staff that may work for 8 hour staff or it may work in an office setting where there is not constant vigilance and frequent interventions which have life and death consequences.

What works best is to start at 0645 and take a 10 minute break between 0900-1100. Then lunch is between 1100-1500. Then a last 10-minute break is between 1600-1800.

The problem with being so prescriptive in the medical setting is the fact that unanticipated barriers occur. I could have a nurse going to the CT scanner with their patient and then I cannot have another nurse off the floor having lunch. A nurse may be the last one to go to break and then their patient has a cardiac arrhythmia which needs treatment. It could be that a family member arrives from out of town to see their dying loved one. It could be that all three of these things are happening. In the world of an ICU nurse, we are here to care for the patients. There is no way we can walk away.

Please reconsider the policy that everyone has to take a break within the first 6 hours of a 12 hour shift. At least consider instead that lunches need to be taken within the first 8 hours. There are more options that way. We can be more compliant. It may take some imagination to consider a work environment that you are unaccustomed to but it is necessary to understand our plight.

Thank you,

Lora Strick, BSN, RN, CCRN  
ICU Lead  
PAMC

[ADVENTISTHEALTH:INTERNAL]

**Seiler, Erin**

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**From:** Helms,Sheryl <HelmsSR@ah.org>  
**Sent:** Thursday, May 20, 2021 6:20 PM  
**To:** Seiler, Erin  
**Subject:** Petition for Rulemaking on OAR 839-020-0050

To Whom it May Concern;

I am an ICU nurse at Adventist Medical Center. The regulation that states that all employees must take a 30 min lunch break before 6 hours. This is very difficult for two reasons:

- 1) Nursing, especially in an ICU is not a controlled environment. We cannot always anticipate what patient care needs will be and taking a lunch at a specific time makes it very difficult to do our job well.
- 2) Most hospitals now have 12 hour shifts. In order to give everyone on the unit mandatory 30 min break before 1:15 requires us to start lunches as early as 11:30. That is only 4 1/2 hours into the shift. Most of us would prefer to take our 30 min break when half of the day is already over. This regulation does not make sense for people who work 12 hours a day.

I know this regulation was put in place to ensure adequate breaks for hourly workers, but it needs to be reevaluated to encompass people who work longer day. Thank-you,

Sheryl Helms  
RN, BSN, CCRN  
ICU

[ADVENTISTHEALTH:INTERNAL]

May 20, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am a nurse leader at Adventist Medical Center Portland which serves SE Portland and I work in Family Birth which cares for laboring, delivering moms and postpartum moms. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are not represented by a union. BOLIs rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break often too early in the shift. We also might need to take our breaks around the acuity of patient status which changes throughout the shift and is variable and unpredictable.

For instance, if we start our shift at 7 am and our patient has a baby deliver at 12:00, there is not often another nurse available to spend 1:1 time with our patient during this recovery/post birth time period. Or if there is an emergency on the unit, it could easily take up multiple staff for several hours worth of time.

Also there are many staff scheduled in the shift and there needs to be adequate coverage for the patients on the unit during the breaks so they cannot all be taken at the same time.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,  
Angela Philip, RN  
Adventist Medical Center  
Family Birth Place



May 20, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am a nurse leader at Salem Hospital which serves Marion County and I oversee the Critical Care and Adult Health division which care for critically ill and non-critically ill patients. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are not represented by a union. BOLIs rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break so early in the shift when they prefer a meal break later.

Having multiple breaks (3 breaks and 1 meal period) requires multiple hand off to another nurse every time the primary goes on break. Multiple hand off could potentially create patient risk for missed care and errors.

Several staff expressed concerns that the 30 min meal break is not enough to walk to the cafeteria, get their food and have a comfortable, relaxing lunch break. Having the ability to combine a break and meal will provide them such opportunity. It's a great way of caring for our frontline caregivers and their wellness.

In the acute health care environment, the flexibility to schedule rest and meal breaks will allow better planning for scheduling and coverage to staff while on their break.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforce needs as they support our patients.

Thank you,  
Zennia B. Ceniza MA, RN, CCRN-K, ACNP-BC  
VP of Clinical Operations  
Salem Health Hospital and Clinics  
[Zennia.ceniza@salemhealth.org](mailto:Zennia.ceniza@salemhealth.org)

**Seiler, Erin**

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**From:** Owens,Natosha <owensn1@ah.org>  
**Sent:** Thursday, May 20, 2021 5:26 PM  
**To:** Seiler, Erin  
**Cc:** dmeyer@oahhs.org; aeaston@oahhs.org  
**Subject:** Petition for Rulemaking on OAR 839-020-0050

May 20, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am a nurse leader at Adventist Health Tillamook which serves Tillamook County, which is a rural community in the Pacific Northwest Region, and I oversee the Emergency Department which care for a large variety of our population, anywhere from pediatric, to geriatric patients, and everyone in between. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are not represented by a union. BOLIs rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break so early in the shift when they prefer a meal break later. It has been very difficult for staff to take lunch breaks within the required time frame due to staff caring for many critical patients during their shifts. In the Emergency department, the required time for staff to take their lunch break is often the most difficult time on all shifts. It is often when we have the most patients, with higher acuity levels, such as trauma patients for example. Due to the Emergency department being unpredictable of what type of patients, and how many patients come into the department at any given time, makes it very difficult to plan for lunch breaks within the required time frame without disrupting patient care.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,

Natosha Owens, RN, BSN  
Clinical Nurse Emergency Department Manager  
Adventist Health Tillamook  
503-815-2452

**Seiler, Erin**

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**From:** JK Edmonds <jkedmonds932@gmail.com>  
**Sent:** Thursday, May 20, 2021 5:21 PM  
**To:** Seiler, Erin  
**Subject:** Proposal for rule change for meal period regulations for 12hr shift employees in patient care environments

To whom it may concern,

As someone who has been working 12 hour shifts as a nurse for the last 22 years I would welcome this rule change! Many days I am not really ready for a lunch break at 11:30. I would appreciate having the opportunity to delay my lunch break to a later, more logical time based on the needs of my patients and my level of hunger and my rest requirements.

What I do not want to happen is for my employer to have the final say about when that is, or the ability to unreasonably delay my lunch break if I have been there for >6 hrs and need a break. I do feel the ~6hr time frame is generally reasonable and appropriate for my work in my unit on most days. Employers should not feel free to overload assignments in the middle of the day so that we must take our break later. Ideally we will work together to discern the best arrangement for the individual employee AND unit/patient needs. This is exactly what my unit did before the current rule came into being - early eaters went earlier, later eaters went later - everyone adjusted their times based on patient care needs and were happy until the new inflexible rule came out.

Thanks for considering this change,  
Katie Edmonds RN BSN

**Seiler, Erin**

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**From:** Holmes, Jenny :LMP Med Surg ICU <JEHOLME@LHS.ORG>  
**Sent:** Thursday, May 20, 2021 5:13 PM  
**To:** Seiler, Erin  
**Subject:** Petition for Rulemaking on OAR 839-020-0050

I'm writing to ask that this rule be changed. As a critical care nurse, it's a horrible feeling to walk away from a patient who isn't doing well because I have to take a lunch between 11 and 1pm. This job doesn't have pause buttons. We can't just walk away and leave a critically ill person with someone who doesn't know as much as we do and enjoy our break or even relax. This rule made sense when we worked 8 hour shifts but during a 12-hour shift, it's illogical. I can see a rule that says we have to take a 30-minute uninterrupted break sometime during our shift, but we're the only ones who know when we're hungry, when we need a break, and if it's in the best interest of the patient for us to take that break. Thank you for your consideration and I beg you to please change this rule.

Jenny Holmes BSN, RN, CCRN

May 20, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am a manager at Legacy Mt Hood Medical Center which serves SE Portland and Gresham area and I manage the Family Birth Center which cares for new mothers, babies and gyn patients. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are not represented by a union. BOLIs rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our car team is required to take a meal break so early in the shift when they prefer a meal break later.

My team members work 12-hour shifts. Usually the busiest part of a shift is often in the first 6 hours following report, as doctors do their rounds, orders are changed, procedures are scheduled, and patients are eager to be discharged. This makes it difficult to complete both a break and a 30-minute lunch period in that first 6 hours without interrupting patient care and satisfaction. The first part of a shift is when procedures are scheduled.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care today. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

All employees need break times throughout the day. It is very difficult for any person to be required to take their meal /rest period when they have just started their shift. We respect all Oregon hospital and health care employees as professionals and know that they want to take the meal break when it fits best for them. If adopted, this regulatory change would allow all healthcare settings to adopt policies that allow for more flexibility in when to schedule these breaks. And be more responsive to the care teams needs as well as patient's needs.

By allowing staff to take breaks and lunch when it best fits their workload, it would also allow them better rest as they are more relaxed knowing it is a "good" time for them and their patients.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,  
Barbara Kirby MSN RNC  
Legacy Mt Hood Medical Center  
bkirby@lhs.org

May 20, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am the Chief Medical Officer at Adventist Health Portland which serves South East Portland, but also the entire state as part of OHSU Health, as we take transfers in from across the state. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are not represented by a union. BOLI rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break far too early in the shift when they prefer a meal break later.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are more burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

Thank you for reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforce needs as they support our patients.

Thank you,

Wes Rippey MD FACS  
Chief Medical Officer, Adventist Health Portland  
Senior Medical Officer, Adventist Health  
10123 SE Market  
Portland, Oregon 97216  
503-251-6150

May 20, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am a nurse leader at Adventist Health Portland which serves the southeast Portland area and I am the manager of the Telemetry Unit. I have been a nurse for 36 years and I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are non-union. BOLI's rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break early in the shift when they prefer a meal break later.

A staff member who starts work at 0645 will typically take their first rest period after the first med pass is completed, around 0930 – 1000. In order to meet the requirements of the current Meal and Rest breaks rule, nurses then need to start taking lunches at 1100 to ensure everyone has a chance to take their meal break before 1300. For patient safety purposes we can only have one, maybe two RNs off the floor at a time. This means that the remaining six hours have two rest periods. The majority of our nursing team prefers to take a little later lunch, so as to better split up the 12-hour shifts.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements more than if they worked in non-healthcare positions.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforce's needs as they support our patients.

Thank you,  
Sandra Montminy, RN, MSN  
Manager, Telemetry Unit, Adventist Health  
503-261-6685  
[montmisk@ah.org](mailto:montmisk@ah.org)

**Seiler, Erin**

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**From:** Pokorny, Deborah <PokornDJ@ah.org>  
**Sent:** Thursday, May 20, 2021 1:33 PM  
**To:** Seiler, Erin  
**Subject:** Petition for Rulemaking on OAR 839-020-0050

May 20, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am the interim ED Director at Adventist Medical Center which serves a very diverse population in southeast Portland, which includes homeless and underserved community members. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are not represented by a union. BOLIs rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break so early in the shift when they prefer a meal break later.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,  
Deb Pokorny, MSN, RN  
Interim ED Director  
Adventist Medical Center  
502.251.6814

[ADVENTISTHEALTH:INTERNAL]



May 20, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am a nurse leader at Adventist Health Tillamook which serves Tillamook County and outlying Rural Healthcare Clinics and I am the Director of Surgery which care for outpatient, elective ambulatory surgeries and inpatient surgeries, including urgent & emergent cases. I am also the Director of Outpatient Services which provides care for cancer patients, oncology, wound care, transfusions, infusions, injections and foot care. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are *not* represented by a union.. BOLI's rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 9-hour shift, our care team is required to take a meal break so early in the shift when they prefer a meal break later.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,

Kelley Downing RN CNOR  
Adventist Health Tillamook  
Director of Surgical Services and Outpatient Services  
1000 Third St  
Tillamook, OR 97141  
503-815-2474

## Seiler, Erin

---

**From:** Gail Worden-Acree <GailW@samhealth.org>  
**Sent:** Thursday, May 20, 2021 12:49 PM  
**To:** Seiler, Erin  
**Cc:** Andi Easton; Danielle Meyer  
**Subject:** Petition for Rulemaking on OAR 839-020-0050

May 19, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am the Vice President of Human Resources for Samaritan Health Services with five hospitals serving Lebanon, Albany, Corvallis, Newport, Lincoln City and surrounding communities. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At our hospitals, nurses are represented by ONA, with the exception of North Lincoln Hospital where nurses are not represented by a union. BOLLs rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

For our non-represented employees, the current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break early in the shift when they prefer a meal break later. An example would be nurses who work a 12-hour shift, 7:00 am to 7:30 pm. Given that meal breaks need to be staggered, the nurses would need to take their lunch between 11:00 a.m. and 12:30 p.m. Many feel that 11:00 is too early, especially given that they will not get home until approximately 8:00 pm.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

We do also have union-represented employees and feel that all employees need break times throughout the day, but we recognize that flexibility in how they schedule it is key. We respect all Oregon hospital and health care employees as professionals and know that they want to take the meal break when it fits best for them. If adopted, this regulatory change would allow all healthcare settings to adopt policies that allow for more flexibility in when to schedule these breaks and also be more responsive to both care team and patient needs. Having flexibility would allow nurses, and other professionals, to adjust to emergent patient need while still making sure that they receive their meal and rest periods

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,

Gail Worden-Acree  
Vice President, Human Resources  
Samaritan Health Services  
815 NW 9<sup>th</sup> St., Corvallis, OR 97330  
P: 541-768-6068 F:541-768-5272  
[gailw@samhealth.org](mailto:gailw@samhealth.org)  
samhealth.org

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May 20, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

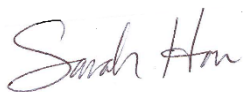
I am the chief nursing officer at Salem Health, a health system consisting of two hospitals and a network of primary and specialty care clinics. We serve Marion and Polk Counties. I am writing in support of the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. The way the current rules are written are burdensome to staff and dangerous for patients. They do not allow the flexibility needed for our workforce or our patients, particularly in facilities like ours who do not have a union presence. Rules should be applied equally across unionized and non-unionized facilities, and the proposed changes would ensure restrictions are not imposed differently in different settings.

The current meal and rest break rules do not allow for flexibility or choice by healthcare providers who need variability based on the needs of their patients and the lengths of their shifts. Under the current schedule, employees working a 12-hour shift are required to take a meal break early in the shift when the employee would often prefer a meal break later, or the flexibility to respond to the flow of patient care in their shift. Particularly for nurses in settings like labor and delivery or the operating room, flexibility is needed to adjust to the needs of the patient, rather than forcing a break at an arbitrary hour. The one-size-fits-all approach of the current rules puts patients at risk. It increases the number of patient handoffs, adding risk and reducing safety.

The strict requirements for scheduling meal and rest periods under the current regulations do not allow flexibility for non-unionized staff. The regulations are not designed for healthcare or for the longer shift scheduling, which is common in health care. Employees shouldn't view their rest and meal breaks as a burden, but the inflexible nature of the current rules do just that.

Thank you for your reviewing our feedback. We encourage you to re-open this rule and create a fair and flexible standard. It will serve our healthcare workforce and our patients.

Sincerely,



Sarah Horn, RN  
Chief Nursing Officer  
Salem Health

**Seiler, Erin**

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**From:** Olga Kelson <olgakelson@gmail.com>  
**Sent:** Thursday, May 20, 2021 12:17 PM  
**To:** Seiler, Erin  
**Subject:** Petition rule making OAR 839-020-0050

To Whom it May Concern:

I would my vote to be added to the petition for exempting lunch breaks for healthcare workers OAR 839-020-0050.

Thank you,

Olga Kelson

Sent from my iPhone

## Seiler, Erin

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**From:** Jaime Fogelsong <jfogelsong77@gmail.com>  
**Sent:** Thursday, May 20, 2021 11:53 AM  
**To:** Seiler, Erin  
**Subject:** OAR 839-020-0050

Erin Seiler,

I am a RN at Providence Portland Medical Center and I was informed that you were taking public comments on the current break issue. As a night shift floor nurse, the current times can be quite difficult to use because one never knows what will happen with our patients. There can be emergency issues that would require the bedside nurse to be present and thus missing the assigned time for a break. We are able to make up the break at a later time but it causes undue stress and time. As a night shift charge nurse it also causes a great deal of stress and time to figure out who is taking which break and when or when nurses have to change their times due to patient issues and things need to be realigned.

We cannot be strict on the times for the breaks and need some flexibility. Not to mention that breaks are starting at the most busy of times on a night shift and your list only allows for one person to be gone at any given time. On nights we need to allow for at least two people to be able to take their break at one time. I fully support nurses taking their breaks and we do not have problems on my unit, during night shift, with people getting all of their breaks in. I humbly request that your form change and allow us some flexibility in the times and allow two people to be off the floor on their break at a time.

Thank you for your time,

Jaime Fogelsong  
Surgical Oncology Charge Nurse



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## Seiler, Erin

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**From:** Dayna Bliss <clarette.young@gmail.com>  
**Sent:** Thursday, May 20, 2021 11:22 AM  
**To:** Seiler, Erin  
**Subject:** RN wanting to change OAR 839-020-0050

To whom it may concern,

I am an RN who works in an Oregon hospital and I am reaching out to you to discuss my concerns, frustrations, and advocate for a change to a law that doesn't appear to be originally intended for my type of work.

RN's and other hospital workers often work 12 hour shifts. We are provided at minimal one 30 minute lunch break and three 15 minute breaks. Under the current law laid out in OAR 839-020-0050 we are required to take our lunch break between the 4th and 6th hour of our shift. This means we are legally required to take our biggest break before our shift is even half-way through. This is illogical for 12 hour shifts. The majority of my co-workers have voiced to me their strong dislike for this law and this requirement. Nurses and other hospital workers are not ready nor do they want to take their meal period break so early into their shift. I work night shifts and night shifters like to take naps during their breaks to help make working at night more manageable. In order for these breaks/naps to be successful for hospital workers they need to be during the second half of our shift and they need to be longer than 15 minutes.

The type of work we do is often emergent or urgent. I work in a critical care unit and after a year of working with COVID-19 I cannot stress enough how hard it is to keep patients safe when all of the staff is required to leave for 30 minutes within two hours which drastically cuts down on support and man power. During these two hours we are constantly short 1/4 (at least) of our staff. Time does not stop for our patients during these two hours. Patients rapidly decline, patient's code, patient's die in these two hours. If your parent was in the hospital and started to rapidly decline or was about to go into cardiac arrest and require emergent intubation or chest compressions would you want them to have as many resources as possible to help them live? Emergencies happen constantly at a hospital and OAR 839-020-0050 does not allow for the flexibility we need. I've been forced to go to a meal break while my patient was declining and I can tell you it is impossible to have a meaningful break or to adequately rest because it is the nature of nurses to genuinely care about their patients. This law puts the well-being of our patients at risk and hinders our ability to provide them the safest care. I may be wrong but I doubt this law applies to other first responders, so why should it apply to us?

This law is intended to make sure that employers are providing breaks to their employees but this law burdens the average hospital employee. We need a law that is more supportive of 12 hour shifts and considers the nature of work we do. It is very important that hospitals are held accountable for ensuring that their staff have adequate breaks but please allow us more freedom and flexibility to take them when it is safe for our patients and when they can provide us with the most benefit.

Thank you for taking the time to listen,  
Dayna Bliss RN BSN

## Seiler, Erin

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**From:** Erdmann,Diana <ErdmanD1@ah.org>  
**Sent:** Thursday, May 20, 2021 8:55 AM  
**To:** Seiler, Erin  
**Subject:** Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

### **Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am a Director of Nursing at Adventist Health Portland which serves the Southeast Portland community and I oversee the inpatient units which care for acutely/chronically ill hospitalized patients. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are not represented by a union. BOLI's rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break so early in the shift when they prefer a meal break later.

Our nursing shifts are scheduled 0645-1915 or 1845-0715 and the current requirements are challenging to incorporate into patient care. Our teams prefer to take their meals later in the shift, most of the team likes meals after 1pm, it allows them to feel like they have met the needs of our patients before leaving the unit for their meal break. Night shift particularly has request that the meals and break times be combined to allow for a longer rest and time to recoup during their shifts.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,  
Diana Erdmann, MSN, RN, CENP  
Adventist Health Portland  
503-261-4457

**Diana Erdmann | MSN, RN, CENP**  
Administrative Director IP Units  
Adventist Health Portland  
10123 SE Market Street, Portland, OR 97216  
(o) 503-261-4457





**Administration**

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AdventistHealthTillamook.org

May 19, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am the Patient Care Executive/CNO at Adventist Health Tillamook which serves Tillamook County and I oversee all nurses in our organization who care for our patients. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are not represented by a union. BOLIs rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break so early in the shift when they prefer a meal break later.

Nursing staff at Tillamook work primarily 12-hour shifts. We struggle with the 3-6-hour time frame as many do not choose to go to lunch as early as this would require.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,

A handwritten signature in black ink that reads "Kathy Saxon".

Kathy Saxon  
PCE/CNO, AH Tillamook  
503-815-2258  
saxonkm@ah.org

## Seiler, Erin

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**From:** O'Dell, Melissa <ODellMJ@ah.org>  
**Sent:** Thursday, May 20, 2021 8:11 AM  
**To:** Seiler, Erin  
**Subject:** Rest and meal periods in healthcare

I've worked in the ED for the last 7 years. Taking a lunch break in hour 2-5 of a 12 hour shift is often less than ideal. Furthermore, the demands of healthcare make it impossible to know what a day will look like. Planning for meal breaks is a daily challenge. I believe we have to protect workers rights to breaks. I also believe that we need flexibility. Between hours 4 and 8 gives us the ability to accommodate the daily influxes of patients AND staff preferences for later lunches.

Thank you,

*Melissa O'Dell, RN*

CIS Physician Educator and Relief Charge Nurse Emergency Department  
Adventist Health Portland  
10123 SE Market St, rm 408 | Portland, OR 97216  
[odellmj@ah.org](mailto:odellmj@ah.org)

[ADVENTISTHEALTH:INTERNAL]

May 20, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re:      Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

We are Vice Presidents of Nursing at Asante Health System which serves Jackson and Josephine counties, and I oversee Nursing Services for acute care patients. We are writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At Asante Rogue Regional Medical Center (ARRMC) nurses are represented by the ONA. At Asante Ashland Community Hospital (AACH) and Asante Three Rivers Medical Center (ATRMC) the nurses are not represented by a union. BOLLs rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

For AACH and ATRMC, the current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break much earlier in the shift when they often prefer a meal break later. For example, a nurse working 7am – 7pm would be required to take their first break at or around 9am and a meal rest period at 11am as outlined below:

- 7am – Start Shift
- 9am – First break
- 11am – Meal period
- 2pm – Second break
- 4pm – Third break
- 7pm – End Shift

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. Allowing for flexibility in scheduling meal and rest periods would support staff who need to continue their current patient care duties to ensure continuity of care and patient safety. For example, a nurse caring for a laboring patient may not be able to take their scheduled meal period until after the birth to ensure patient safety. Another example could be staff members addressing a trauma in an Emergency Room and unable to transfer care to another care team member to take a break. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

All employees need break times throughout the day, but we recognize that flexibility in how they schedule is key. At ARRMC, our ONA nurses can determine when they take their rest and meal breaks and have the flexibility to combine their breaks based on patient care needs. We believe the nurses at all three of the Asante hospitals should be afforded this same flexibility. We respect all Oregon hospital and health care employees as professionals and know that they want to take the meal break when it fits best

for them. If adopted, this regulatory change would allow all healthcare settings to adopt policies that allow for more flexibility in when to schedule these breaks. It also allows staff to be more responsive to the care teams' needs as well as patients' needs.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,

**Amanda Kotler BSN, MBA, RN**

Vice President of Nursing

Asante Rogue Regional Medical Center

Asante Ashland Community Hospital

PH: 541.789.4468 | [Amanda.Kotler@asante.org](mailto:Amanda.Kotler@asante.org)

**Laura Magstadt MBA, MSN, RN, NE-BC**

Vice President, Nursing

Asante Three Rivers Medical Center

541.472.7313 (o) | [Laura.Magstadt@asante.org](mailto:Laura.Magstadt@asante.org)

**Seiler, Erin**

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**From:** cami oana <camic\_oana@yahoo.com>  
**Sent:** Thursday, May 20, 2021 6:31 AM  
**To:** Seiler, Erin  
**Subject:** Lunch breaks

Hello I'm a night nurse at Legacy Emanuel and i would like to make my voice heard over our designated lunch times.

We are supposed to take our half hour lunch breaks between 10pm and 1am which can often be some of our busiest hours. Between 11 and 1am we are checking and assessing our most critical patients who need close observation. Also admitting spikes during these hours.

This isnt a time to take a lunch. I cant hand off my busiest tasks to another nurse who is also struggling to get their tasks done too.

I wish to take my lunches at whatever time i feel works out for my patients and i and also the unit as a whole. I am a nurse with a degree and i feel like i have the education to be able to judge a safe and appropriate time to take my lunch.

Thank you for listening

[Sent from Yahoo Mail on Android](#)

I am Lynae Moor, Charge Nurse at Adventist Health/OHSU Portland. I work in Women's Health/OB. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are not represented by a union. BOLLs rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our car team is required to take a meal break so early in the shift when they prefer a meal break later. This is especially true on 12 hour night shift. They start work at 1900 and to get on the 5-7 staff on break before the required time, is difficult. Some staff have to take a very early break. This is not appreciated and leaves a longer time, the last 6-7 hours of the shift, without a 30 min break.

I have been an OB RN for over 40 years and have worked in all areas of my department, including management. I understand, we must give employees covered, uninterrupted, documented breaks. I just would appreciate some flexibility in managing those breaks and give my staff some options.

The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,  
Lynae Moor RN  
AHP/OHSU

May 20, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am a clinical nurse manager and a bedside nurse at Blue Mountain Hospital in eastern Oregon, we serve all of Grant County. I oversee and work in ED, Med-Surg, and OB departments. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital, a union does not represent our nurses. BOLLs rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

For our non-ONA hospital, the current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break even when they personally are not needing or wanting to take their breaks.

Staff members on a personal level do much better when they are able to eat and rest when they need to, and to have the flexibility to arrange a safe patient transfer of care to another equally skilled RN. Our nursing staff rarely go thru their shifts without taking their meal and rest breaks but it is often very difficult to do this on a set schedule.

In a small Critical Care Access Hospital there are not an abundance of equally skilled nurses to relieve direct care nurses as a resource for meal and rest breaks. Direct care nurses often times can not take a break during these scheduled times due to critical patient care. Changing nurses during these times create an extremely dangerous risk to the patient's safety.

Because of our focus to patient safety, we are often times faced with the choice of following the laws or providing safe care in order to protect our patients.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations only causes difficulty and ethical dilemmas for health care providers. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,  
Joanne Hansen RN Interim DNS

Blue Mountain Hospital  
John Day, Oregon

**Seiler, Erin**

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**From:** linda Maggio <lifeisgood3@msn.com>  
**Sent:** Wednesday, May 19, 2021 1:23 PM  
**To:** Seiler, Erin  
**Subject:** Petition for Rulemaking on OAR 839-020-0050

Along with many others in the healthcare industry, Registered Nurses in particular, I work a 12 hour shift. Due to unpredictable patient care environments, and the length of our shifts, I ask that we be exempt from the rule stating that the lunch break must occur after the third hour of work and before the end of the sixth hour of work. The current rule is antiquated, based on an 8 hour work day, and does not account for contemporary 10 and 12 hour shifts.

Thank you.  
Linda Maggio RN

Sent from [Mail](#) for Windows 10



**Seiler, Erin**

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**From:** Ragsdale, Kristie D :LMH Diagnostic Imaging <KRAGSDAL@LHS.ORG>  
**Sent:** Wednesday, May 19, 2021 12:58 PM  
**To:** Seiler, Erin  
**Subject:** Rulemaking on OAR 839-020-0050.

Regarding the lunch breaks, my opinion is that those employees that have no one to completely relieve them of their duties should not be forced to clock out for lunch. There are shifts at this hospital that have only one tech available to do the job. For example the night shift has one person that does CT. There is no one to relieve that employee for their lunch, this employee has to be in the building and available at all time in case a stroke patient comes through the door. They have to be available if the phone rings in their department and a patient is rushed directly from the ambulance to CT. They are never truly relieved off all of their duties. Their shift should not have to include a lunch break. Other shifts have the ability to leave campus and be relieved of all duties as there are other qualified people able to do their job. Night employees end up just clocking in and out for lunch while still remaining in their work area on duty since there isn't another person able to cover them.

## Seiler, Erin

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**From:** Hopwood, Erica M :LMP Med Surg ICU <ehopwood@lhs.org>  
**Sent:** Wednesday, May 19, 2021 9:44 AM  
**To:** Seiler, Erin  
**Subject:** Petition for rulemaking on OAR 839-020-0050

Hi Erin,

I am writing to petition for flexible lunch hours for nurses and CHT hospital staff. Limiting lunch hours creates an environment where nurses become focused on meeting regulations for the state rather than focusing on patient care and safety. Due to restricted hours, we must consider what patient care is more important and what can be delayed rather than working around our personal and patient's schedules. We as nurses have a calling to this profession and should have the ability to choose when to take our lunches during our hectic, busy schedules. Especially in the last year, when our schedules and tasks have become even busier caring for those with covid. We have a right to choose when to eat and not be told by the state when that is. We and our patients deserve more flexibility.

Thank you,

Erica Hopwood, RN, MSN

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods

Commissioner Val Hoyle:

I am a direct care nurse at Legacy Mt Hood Medical Center which serves SE Portland and Gresham area and I work in the Family Birth Center which cares for new mothers, babies and gyn patients. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are not represented by a union. BOLI's rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break so early in the shift when they prefer a meal break later.

I work a 12 hour shift from 6a.m. - 6p.m. The busiest part of my shift is often in the first 6 hours as doctors do their rounds, orders are changed, procedures are scheduled and patients are eager to be discharged. This makes it difficult to complete both a break and a 30 minute lunch period in that first 6 hours without interrupting patient care and satisfaction.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements more than if they worked in non-healthcare positions.

All employees need break times throughout the day, but we recognize that flexibility in how they schedule it is key. We respect all Oregon hospital and health care employees as professionals and know that they want to take the meal break when it fits best for them. If adopted, this regulatory change would allow all healthcare settings to adopt policies that allow for more flexibility in when to schedule these breaks. And be more responsive to the care teams needs as well as patients needs.

By allowing staff to take breaks and lunch when it best fits their workload, it would also allow them better rest as they are more relaxed knowing it is a "good" time for them and their patients.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,  
Cynthia Dundon, RNC  
Legacy Mt Hood Medical Center  
cdundon@lhs.org

**Seiler, Erin**

---

**From:** Christina Lauren <christinalauren18@gmail.com>  
**Sent:** Wednesday, May 19, 2021 8:05 AM  
**To:** Seiler, Erin  
**Subject:** Petition for OAR 839-020-0050

Dear Erin,

I am writing to petition that healthcare workers be exempt from the law stating we have to take our lunch breaks within the first 6 hours of our shift. I appreciate that we have a law that helps insure we do get breaks, but this time constraint is unsafe for us nurses and our patients. Working in the ICU, emergencies happen at anytime and multiple emergencies can be happening all at once. The time we are required to take lunch is a very busy time for us and often leaves us short staffed and delays in patient care.

Sincerely,

Christina Lauren RN, BSN

## Seiler, Erin

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**From:** Batiste,Katherine <batistkl@ah.org>  
**Sent:** Tuesday, May 18, 2021 4:09 PM  
**To:** Seiler, Erin  
**Subject:** OAR 839-020-0050, Meal and Rest Breaks

I am a staff nurse at Adventist Medical Center in Portland, OR. I work 12 hour shifts. Our hospital is not represented by a union.

I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. Our hospital needs to have the ability to modify meal and break rules to better support the healthcare environment. We need a larger window for lunch breaks. I don't want the hospital to be penalized if we can't take our breaks on time. And I don't want to be penalized for not being able to take my break on time.

Thank you,

Kathy Batiste, BSN, RN  
Adventist Health

[ADVENTISTHEALTH:INTERNAL]

**Seiler, Erin**

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**From:** Wilhelm, Reba :LMH Med Surg ICU <RMWILHEL@lhs.org>  
**Sent:** Tuesday, May 18, 2021 3:57 PM  
**To:** Seiler, Erin  
**Subject:** BOLI Laws

May 18, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods  
Commissioner Val Hoyle:

I am a direct patient care nurse at Legacy Mt. Hood Hospital which serves Gresham/Troutdale and more and I work in the intensive care unit which care for critically ill patients. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. BOLI's rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or **autonomy** of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break so early in the shift when they prefer a meal break later. Beyond the want to take breaks when I need to my bigger concern is ALWAYS my patient. As a direct care nurse I know what my patient needs, and when they need it. I feel at times based on my patients condition that I cannot leave them. As their primary nurse I WANT to stay at their bedside and attend to them. As a professional healthcare provider I believe it should be my right to decide when I take my lunch/breaks in order to best care for my patient and the community. Being a pregnant, COVID ICU nurse during a pandemic I feel it is best to allow me the autonomy to decide the best time to take my breaks based on my patients need.

Thank you for your time,  
Reba Wilhelm

Feel free to contact me for further information.  
rmwilhel@lhs.org

May 20, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am a direct care nurse at Legacy Mount Hood Medical Center which serves the East County region of Portland and I work in the Surgical Specialties Unit which cares for surgical patients and medical overflow patients. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are not represented by a union. BOLI's rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break so early in the shift when they prefer a meal break later.

When I start a shift at 0700 there is a lot to do all morning. Bedside report, looking up my patients orders and plan for their immediate needs or concerns. Often in the morning we are getting patients ready to go to surgery or to a procedure. Most of our patients experience pain and need pain medications every four hours. Most patients are categorized as high fall risks which means we need to be in the room often to keep them safe. Attempting to take a first break before the 10 o'clock hour, which starts the beginning of current lunch rules, is a feat if accomplished. Trying to take a lunch break right after we may have taken a morning break does not work well with the flow of hospital nursing. It seems that patients often have the most urgent needs or the most pressing concerns in the first half of the day.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,



Jodi Riehl RN  
Staff RN, Legacy Mt. Hood Medical Center  
503-674-2091

May 20, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am a Nurse Manager at Legacy Mount Hood Medical Center which serves east Multnomah County and the surrounding rural areas, and I oversee the ICU, PACU, and Cath Lab. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are non-union. BOLI's rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break so early in the shift when they prefer a meal break later.

Based on patient needs, number of staff present, and scheduled procedures it is challenging to schedule 10 to 25 lunch breaks before the end of the 6<sup>th</sup> hour of the shift worked. Health care is not a job where staff can just leave the workspace at any given moment. Patient's must be safe, and care of the patients must be transferred to other staff members to allow for meal and rest periods. In smaller units only one staff member can go to lunch at a time to ensure that all patients are safely cared for. This means that some staff members must take their lunch at 10 a.m. when their shift does not end until 19:30. This is a huge staff dissatisfier, and their remaining rest breaks do not allow for enough time to get a full meal in later.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when they take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,  
Sara Hinkeldey, MSN, RN, CCRN-K, CNML  
Nurse Manager, PACU/CATH LAB/ICU  
shinkeld@lhs.org



**Seiler, Erin**

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**From:** Yanez-Rubio, Corrina A :LGS Patient Access <CORUBIO@LHS.ORG>  
**Sent:** Tuesday, May 18, 2021 1:01 PM  
**To:** Seiler, Erin  
**Subject:** Rule making OAR 839-020-0050

Hello Erin,

I work in patient access at Legacy Good Samaritan. I am writing to express my frustration with the above ordinance that requires employees to complete a 30 min lunch within the first 6 hours of any shift. This works fine for a 8 hours shift but when you are scheduled a 10 - 12 hour shift or more and the same rule applies it is very frustrating. No one wants to complete their lunch and then still have 6+ hours left in their shift. I am hoping that more consideration is made and that the rules applying to when lunch is taken can be redone.

Thank you,

Corrina A. Yanez-Rubio, Patient Access  
Legacy Good Samaritan Medical Center  
1015 NW 22nd Ave, Portland, OR 97210  
Work Phone: (503)413-8035  
Email: corubio@lhs.org

May 18, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am a nurse leader at Legacy Mt. Hood which serves the East Multnomah County area and I oversee the IMCU and Surgical Specialties units which care for pre/post Cath Lab patients and pre/post-Surgical patients. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are not represented by a union. BOLI's rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break so early in the shift when they prefer a meal break later.

Our staff start their shift at 0700/1900 and to get all 7-8 staff members to complete their meal period by 1300 we need to start taking our meal periods at 1000. The first part of their shift is busy with assessments, passing medications, treatments and physician rounding. Taking their meal period this early in the shift compromises patient care and safety.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when to take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,

A handwritten signature in black ink that reads "Candice Hutchison MSN, RN". The signature is fluid and cursive.

Candice Hutchison  
Manager, Legacy Mount Hood Medical Center  
503-674-1248

May 18, 2021

Val Hoyle, Commissioner  
Bureau of Labor and Industries  
800 NE Oregon St., Ste. 1045  
Portland, OR 97232

**Re: Petition for Rulemaking on OAR 839-020-0050; Meal and Rest Periods**

Commissioner Val Hoyle:

I am a nurse leader at Legacy Mt. Hood which serves the East Multnomah County area and I oversee the IMCU and Surgical Specialties units which care for pre/post Cath Lab patients and pre/post-Surgical patients. I am writing you in favor of supporting the petition to open rulemaking on OAR 839-020-0050, Meal and Rest Breaks. At my hospital our nurses are not represented by a union. BOLI's rules need to be equal for all employees and this proposed change would ensure such restrictions are not imposed on employees solely based on if they are unionized.

The current Meal and Rest break rules do not allow for flexibility or autonomy of healthcare providers who need variability because of patient needs and lengths of shifts. Under the current schedule, for a 12-hour shift, our care team is required to take a meal break so early in the shift when they prefer a meal break later.

Our staff start their shift at 0700/1900 and to get all 7-8 staff members to complete their meal period by 1300 we need to start taking our meal periods at 1000. The first part of their shift is busy with assessments, passing medications, treatments and physician rounding. Taking their meal period this early in the shift compromises patient care and safety.

The requirement for scheduling meal and rest periods under the current regulations does not allow flexibility for nonunionized staff to have flexibility on when to take their meal and rest breaks. The regulations are not designed for health care or for the longer shift scheduling common in health care. Considered in connection with a nationwide shortage of nursing professionals, employees are burdened by the meal and rest period requirements than if they worked in non-healthcare positions.

Thank you for your reviewing our feedback to opening rules that will equalize meal and rest breaks for all staff and better serve our workforces needs as they support our patients.

Thank you,



Stefanie Whitehead-Pagel  
Assistant Nurse Manager, Legacy Mount Hood Medical Center  
503-674-1248

## Seiler, Erin

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**From:** Wyatt, Emily A :LMP Med Surg ICU <EMWYATT@LHS.ORG>  
**Sent:** Tuesday, May 18, 2021 8:20 AM  
**To:** Seiler, Erin  
**Subject:** Proposal for meal change

**Follow Up Flag:** FollowUp  
**Flag Status:** Flagged

Hello,

I am an experienced ICU nurse in Tualatin, OR. The meal period regulation is extremely frustrating and is not appropriate within the healthcare setting, especially within critical care. Patients come first, and it is hard to do this when we are asked to take our lunch break prior to 1300/0100. As nurses, we need our lunch break, but requiring us to leave by a certain time can often times be unsafe. In addition, 1100-1300 is the busiest time in our unit (patients need help eating their lunches, families are visiting and want updates, etc. ). I really hope you consider changing this regulation. As nurses, we want to keep patients at the forefront of our care - please help us do this.

Thanks,  
Emily W  
ICU RN Legacy Health, CCRN

**Seiler, Erin**

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**From:** Arney, Matt :LMP Med Surg ICU <MARNEY@LHS.ORG>  
**Sent:** Tuesday, May 18, 2021 8:19 AM  
**To:** Seiler, Erin  
**Subject:** OAR 839-020-0050 Petition for Rulemaking

Erin-

As a registered nurse for nearly fifteen years, putting our patients and their safety first has always been the foundation of sound nursing care. The current status of our BOLI meal periods infringes on giving us the autonomy to decide when the safest times is to leave our patients in the care of another while we do our own self-care. This is part of our job, just like police, firefighters, and EMS, we have all chosen to take care of others first. Please allow us to continue doing so, by adding an amendment to make us exempt from having us told when we must leave our patients.

Matt Arney, RN

**Seiler, Erin**

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**From:** Appleman,Allison <ApplemAG@ah.org>  
**Sent:** Tuesday, May 18, 2021 2:11 AM  
**To:** Seiler, Erin  
**Subject:** Petition for Rulemaking on OAR 839-020-0050

Hi Erin,

I work a 12 hour night shift on a medical floor where taking 6 patients is the norm. The first 6 hours of the shift are the busiest, and most of us take our breaks after 1 am when patients have settled down and being responsible for 12 total patients is more reasonable without putting too much of a burden on the other nurse covering for you. Patient care and safety would suffer if this rule was implemented.

Allison Appleman BSN, RN  
Adventist Medical Center

[ADVENTISTHEALTH:INTERNAL]

**Seiler, Erin**

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**From:** Neth, Marieline :LMP Med Surg ICU <MNETH@lhs.org>  
**Sent:** Monday, May 17, 2021 11:10 PM  
**To:** Seiler, Erin  
**Subject:** OAR 839-020-0050

Hi,

I have been a RN for over 10 years and the rule about taking our lunches within the 1st 6h of our 12h shift just does not make any sense. That is not when I need a real break and I can't relax knowing there is so much for my team to do for me while I am gone. It's not safe for the patients. Is that rule was made for people working 8h shifts or something?

Thank you for helping us resolve this matter.

Marieline Neth

## Seiler, Erin

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**From:** Roberts, Andrew M :LEH PCCU <AROBERTS@LHS.ORG>  
**Sent:** Monday, May 17, 2021 10:54 AM  
**To:** Seiler, Erin  
**Subject:** Petition for rulemaking on OAR 839-020-0050

Dear Erin,

I am an RN at Legacy Emanuel in Portland with feedback on the current rule requiring 12-hour RNs to take a lunch prior to 1300pm each day.

I would like to speak to the difficulty I find in taking a lunch prior to 1300 during my shift each day. We are a busy cardiac care unit with 9 staff nurses treating 22 patients daily. We often do procedures on the floor that are sometimes scheduled, sometimes spontaneous. MDs will often arrive and request nursing help on cardiac procedures that require our special training; add this to the already-busy morning routine of passing meds and assessing and charting all patients, and most RNs on my unit are not able to stop and sit down to even begin their charting until 10am or 11am.

At this point, if the day is not too busy, we are able to begin sending one or two RNs at a time to a 15-minute morning break. Each RN must be covered by another RN during break, so only a couple RNs can go at one time. By the time everyone has finally had a morning break, it is often 11:30am or 12noon. At this point, we can now begin cycling the RNs who took their morning breaks the earliest through lunch breaks. At this point, it's 12noon and we now have 9 RNs to send off to lunch, while continuing to do bedside procedures, mid-day vitals, wound dressing changes, walking patients after surgery, etc. etc.

Rarely can we get ANY RNs to a lunch break before 12noon. Therefore, we send a couple nurses at a time between 12noon and 4pm. We are such a busy floor that we simply can't get to lunches earlier. Not to mention this: if I am working 12 hours and I go to lunch at 11:00am to make sure all the other RNs go to lunch before 1pm (which actually STILL wouldn't happen), it's WAY too early for me to eat, as then I'll have low blood sugar for the second half of my shift. I most often eat a "small meal" at 10:00am or 11:00am on my quick break, then I eat my real lunch at 2pm or 3pm when the day calms down enough for me to break away. The reality is that we just can't get everyone to lunch by 1300pm, and even if we could, I would still not go to lunch until 2pm, when it makes sense to fuel my body for the rest of the shift.

I hope this insight is helpful.

Best,  
Andrew R. RN



**Seiler, Erin**

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**From:** Liddane, Taylor J :LMP Med Surg ICU <TJLIDDAN@LHS.ORG>  
**Sent:** Monday, May 17, 2021 3:11 AM  
**To:** Seiler, Erin  
**Subject:** Petition for Rulemaking on OAR 839-020-0050

Hello,

I would like to share that I am an ICU Registered Nurse at Legacy Meridian Park in Tualatin, OR. I would like to be exempt from the rule stating that lunch breaks must occur after the third hour of work and before the end of the sixth hour of work. For a 12 hour shift, it is unreasonable to expect nurses to be able to break before 0100 or 1300. Breaks should be based on patient safety and should be taken when the patients are most stable which could be later in the shift. Thank you very much for looking out for us nurses and we appreciate all the breaks we get.

Sincerely,

Taylor Liddane

## Seiler, Erin

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**From:** Parrish, Jenny :LMP Medical Specialties <GPARRISH@LHS.ORG>  
**Sent:** Monday, May 17, 2021 12:58 AM  
**To:** Seiler, Erin  
**Subject:** Petition for Rulemaking on OAR 839-020-0050

Dear Ms. Seiler,

I am writing to you in regards to the petition to change the rule for meal breaks and rest periods.

I am a registered nurse at Legacy Meridian Park working on inpatient acute care units, including the COVID unit. We work 12-hour shifts, both days and nights. The current meal break rules state that we must take our 30-minute break between the 3rd and 6th hour of our shift, which means we will still have at least 6 hours left on our shift after the 30-minute meal break. This is problematic for nurses working these shifts for several reasons. As already stated, we all have at least 6 hours of our shift left after our break, and that is if you are the lucky nurse who gets last lunch. If you get first lunch, you will have 8 to 9 hours left, depending on what time we were able to start our breaks. Many of my coworkers would prefer to take their longer break later in their shift.

The first 4 to 6 hours of the night shift (between 7pm and 11pm) can be our busiest times, and there are days that you cannot, in good conscience, hand-off your patients yet. For example, if I am getting ready to take my 30-minute break at 11pm and one of my patients falls or suddenly develops chest pain or begins vomiting, it is not right for me to leave them. Imagine: you develop chest pain and call for your nurse. She comes in and you tell her what's wrong. She says, "Alright, but I'm going to take my break now, let me find another nurse (who doesn't really know you) and she'll try to help you, even though she still has all of her own patients to care for right now." If you were the patient, you would probably not feel comfortable with this, and you shouldn't. We don't like handing over patients who are in the middle of something, whether it be a change in condition or yet another bed change, even though we trust our coworkers completely.

Similarly, sometimes the hours after the middle of the shift are calmer and present better opportunities for rest breaks to be taken stress-free. For night shift, the hours between 2am and 5am are typically the slowest and therefore best times for breaks to occur. This does not mean we do not take any breaks prior to this; it just means that our 30-minute meal period would be more practical during these hours.

Additionally, we work in a setting where only one or two staff can take breaks at a time due to number of staff vs number of patients in each area. This can make it especially challenging to get everyone's long break done in time to be in compliance with this rule. It means that someone must take "first lunch" every shift, and no one wants to do that because then they have 8 more hours to go with only 15-minute breaks. And if the first person cannot get to their break on time, there is a domino effect that makes it impossible to finish the breaks before the 6th hour.

It seems clear that parts of this rule were written without regard to shifts longer than 8 hours. While we very much appreciate that we have mandated breaks because we truly do need the rest periods, we would benefit from more leeway on how to get these breaks done.

Please feel free to contact me if you would like to hear any more of my thoughts on this matter.

Thank you very much for your consideration of the needs of the workers!

**Jenny Parrish, BSN, RN, OCN | Clinical Nurse Educator, Medical Specialties**

Legacy Meridian Park Medical Center | 19300 SW 65<sup>th</sup> Ave. | Tualatin, OR 97062

503-692-2481 | [gparrish@lhs.org](mailto:gparrish@lhs.org)

**Seiler, Erin**

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**From:** Roush, Kirsten M :LMP Medical Specialties <KIROUSH@LHS.ORG>  
**Sent:** Sunday, May 16, 2021 9:25 PM  
**To:** Seiler, Erin  
**Subject:** Petition for Rulemaking on OAR 839-020-0050

Hello,

I have been a registered nurse for over seven years now and have some unique input where the lunch time requirements and regulations are concerned. I work nights, and when I come on shift, the first four to six hours are the single most important hours of my shift. My personal preference has always been to get most of my work completed prior to taking my lunch so that I may prioritize my patient care and serve their needs while they are still awake. With the current rules, I must take my break between 11PM and 12:30PM, cutting into essential patient care time. I plead with the Bureau of Labor and Industry to exempt registered nurses and other hospital and unpredictable patient care personnel from the current lunch hour rules. I would like the opportunity to take a lunch break during a period that makes sense for both me and my patients.

Thank you for your consideration,

Kirsten Roush, BSN, RN, CMSRN

**Seiler, Erin**

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**From:** Grimes, Kevin T :LSO Float Pool <KTGRIMES@LHS.ORG>  
**Sent:** Sunday, May 16, 2021 12:26 AM  
**To:** Seiler, Erin  
**Subject:** Petition for rulemaking on OAR 839-020-0050

To whom it may concern,

I'm writing to support the amendment of the rule that requires all hourly employees to take their meal period within six hours of the beginning of their shift. While this rule is appropriate for employees who work 8-hour shifts, it can create a significant burden for employees who work longer shifts. As a registered nurse working in a hospital setting, my shifts, as well as all my co-workers', are 12 hours long. The requirement to take our meal break within six hours of the beginning of our shift creates serious staffing obstacles. On our nursing units, only a small proportion of the staff can take their lunch at one time, in order to maintain a safe ratio of patients to staff. The six-hour requirement creates a situation where staff must begin taking their lunch breaks within four hours of the shift beginning in order for all staff to have taken their lunch breaks within six hours.

In addition to some staff being forced to take their lunch breaks very early in the shift, the timing creates a burden because the busiest part of the shift is the first six hours because that's when nurses are busiest providing patient care. Adjusting the rule for employees who work longer shifts and allowing us to take our lunch breaks later would alleviate these issues, providing us the opportunity to take better care of our patients and feel less stress about getting our lunch breaks "out of the way."

Having to work eight or more hours after our lunch break can be very difficult. Of course I can't speak for all of my colleagues, but I had never found it challenging to take my lunch break when I wanted to prior to the strict enforcement of the six-hour rule. Since its strict enforcement began, I've found it significantly more challenging to take my break at a time that adheres to this rule and also allows me to provide excellent patient care.

Please consider changing this rule so that workers whose shifts are longer than eight hours can take their lunch breaks past the current six-hour requirement. Thank you for your consideration.

Best regards,  
Kevin Grimes, RN, BSN

**Seiler, Erin**

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**From:** Peterson,Jenny <PetersJ3@ah.org>  
**Sent:** Friday, May 14, 2021 3:08 PM  
**To:** Seiler, Erin  
**Subject:** Petition for Rulemaking on OAR 839-020-005

Thank you for the opportunity to weigh in on this pertinent topic regarding meal/rest breaks. We work 12 hour shifts on our jobs at the hospital. It makes intuitive and practical sense to take one of our 10 minute breaks in the first 4 hours of our shift. Our lunch period should be approximately half way through our workday-between the 6th and 7th hour. Pacing of breaks is more equal this way and, of course, most people know their own needs for food and rest periods. This should largely be left to the individuals involved and the needs of the particular unit.

Thank you,

Jenny Peterson

{0}  
Title  
Company

[ADVENTISTHEALTH:INTERNAL]

## Seiler, Erin

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**From:** Jessica Dinh <grasshopper973@gmail.com>  
**Sent:** Friday, May 14, 2021 2:20 PM  
**To:** Seiler, Erin  
**Subject:** comment on OAR 839-020-0050

I have been a nurse for over 20 yrs, and no shift has ever been predictable. Case-in-point, I was 15min into my lunch break last night when an emergency was called overhead in the Family Birth Center. The mom was bleeding terribly and had to be taken straight to the operating room to save both their lives. 7 nurses/respiratory therapists/doctors spent over an hour trying to resuscitate the newborn and yet another 6 were in the operating room with the mother. 3 different lunch alarms went off including mine as we gowned up to go into the mayhem. I paused to laugh at the thought of any of us willing to leave at this moment to finish our lunch as required by OAR 839-020-0050 vs continuing to do our job to save these lives. But that is exactly what OAR 839-020-0050 required us hospital workers to do! Before this emergency was concluded, 3 more calls for acute strokes and emergent airway intubation followed. It was 4 hours later before I was able to sit down and finish my lunch. What started at the 4.5hr mark from the start of shift, ended at the 9th hour mark. But someone else could have done the work, you say? No, emergency protocols call for and require a team, and we have to drop whatever it is we are doing at the moment to respond. All team members have their own regular roles; charge nurses helping with staffing and care of pts, respiratory therapists giving breathing treatments and monitoring airways & machines, doctors evaluating patients. There is not a residual team sitting around 'waiting' to get called.

Would you want to be that mother with 3 less team members because they were on a 'lunch break?' In the medical field, we put the patient's life as the first priority...shouldn't legislature do the same?? It is often called 'shift work' but it is anything but predictable. Hospitals cannot be compared to a cannery. OAR 839-020-0050 should not apply to hospital workers. Even the housekeepers in the hospitals are integral to the team. If there are no clean operating rooms and a patient needs to go now, they have to clean them STAT. A test for bleeding is required before giving a clot-busting drug to save brain tissue, but the patient came in late and you only have 15 minutes to give it (which I have witnessed multiple times), it needs to be run STAT by lab techs. Everyone in the hospital is integral to the team. Please save patients' lives, decrease the stress of our hospital staff from BOLI lunch rules, and save countless time/energy/money spent by administration to police these out-dated rules. Amend OAR 839-020-0050 to exclude hospital workers.

Sincerely,  
Jessica Dinh RNS, MSN

## Seiler, Erin

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**From:** Peacock, Alicia C :LEH PCCU <APEACOCK@LHS.ORG>  
**Sent:** Friday, May 14, 2021 3:56 AM  
**To:** Seiler, Erin  
**Subject:** Re: Petition for Rulemaking OAR 839-020-0050

Hello,

I am a cardiac nurse at Legacy Emanuel and wanted to put in my comments regarding a proposed amendment to modify the rule about taking lunches within the first 6hrs of our shift. Most RNs in the hospital setting work 12hr shifts and don't always need or want to take a long break that early in the day. Our workflow prevents us from having scheduled break times as our patient's needs are unpredictable, and we need to be flexible for whatever happens during our shift. The current requirement is unreasonable and unrealistic. I honestly don't know a single hospital RN who wants BOLI or our employer to tell us when we should take our lunches, we work together as a team on our unit to make sure everyone gets adequate breaks already.

Thank you,

Alicia Peacock BSN, RN, CMSRN  
Legacy Emanuel PCCU



**Seiler, Erin**

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**From:** Alan Markley <alanmarkley@hotmail.com>  
**Sent:** Wednesday, May 12, 2021 8:29 AM  
**To:** Seiler, Erin  
**Subject:** OAR 839-020-0050 petition

I am an ICU RN who has worked in Oregon for 16 years. This email is my support that nurses and other personel in a hospital be given leeway on the rigidity with which we must legally take breaks and lunches. RNs, CHTs(nurse aides), and RTs(respiratory therapists) represent the vast majority of the staff that work at "ground zero" with the patients on a daily/hourly basis in hospitals. This is especially true in emergent or near emergent situations. It is unrealistic that we can all get our breaks/lunches in the specified times that are currently required and keep a safe environment for our patients and staff. I support that nurses and other staff be given more discretion on when they take breaks/lunches and have not, in my 16 years, worked with anyone who has disagreed with this concept. We need our breaks and I am very grateful that there are laws to protect us, but rigid and unflexible rules should not apply to vocations that can be as emergent and life-and-death as those mentioned.

Thanks,  
Alan Markley

**Seiler, Erin**

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**From:** Katie Varco <katievarco@gmail.com>  
**Sent:** Wednesday, May 12, 2021 8:27 AM  
**To:** Seiler, Erin  
**Subject:** OAR-839-020-0050 Public Comment

Greetings,

I hope this email is one of many you have received from frustrated health care workers across Oregon. I am writing to give my opinion on the unrealistic laws implemented by BOLI regarding 30-minute breaks for 12-hour shift workers. My only conflict with the law is that our 30-minute break period must be taken within the third and sixth hour worked.

Having been in a 12-hour acute hospital setting for the past decade, I find the required meal period window to be well-intended, yet sorely misguided. This restriction/limitation interferes with the hospital workflow and the care we provide to our patients, your loved ones. Though I whole-heartedly support the importance of ensuring each employee gets their well-deserved 30-minute uninterrupted break, I do not support requiring employees to eat within the third and sixth hour of their shift. This mandate requires that my day shift co-workers have to start taking meal breaks at 10:30 in the morning; an unrealistic time to eat lunch, and it makes for a very hungry employee by 1900 when they get off work.

I respectfully ask that you rethink the time frame for our 30-minute breaks.

Thank you,

Katie Varco  
Essential Health Care Worker,  
Portland, Oregon

**Seiler, Erin**

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**From:** Sierra Preece <sierra.dawn@hotmail.com>  
**Sent:** Tuesday, May 11, 2021 6:03 PM  
**To:** Seiler, Erin  
**Subject:** Petition on OAR 839-020-0050

Hello,

My name is Sierra Preece and I am a registered nurse working at one of the Legacy hospitals in Portland, OR. Our days are so busy that taking a lunch break within the first 6 hours of our shift is not helpful to us, nor reasonable considering our line of work. I am requesting that our current regulation changes to allow a longer time period to take a lunch break, such as taking a lunch break within the first 9 hours of our shift. This would allow us to prioritize our patients needs and our personal needs in a way that we seem fit.

Thank you for your time,  
Sierra Preece

Sent from my iPhone

**Seiler, Erin**

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**From:** Arzie, Heather :LSO Float Pool <HEARZIE@LHS.ORG>  
**Sent:** Tuesday, May 11, 2021 2:50 PM  
**To:** Seiler, Erin  
**Subject:** meal periods/breaks

In reference to Petition for rulemaking on OAR 839-020-0050

I am a staff nurse for Randall Children's Hospital at Emmanuel Hospital and I would like to share my voice about the requirements surrounding when we take our breaks/meal periods. As a bedside nurse that works 12 hour shifts it is totally unrealistic to require all RN's to lunch before their six hours. Nursing shifts are so variable and never predictable. Some days we can lunch early but other days we cant lunch until much later. Going sooner would adversely affect patient care and put a significant strain on the unit as a whole. I feel that it is my right to take my lunch not only when I want but when it is best for my patients and my peers, so long as I take a lunch, which I always do. We do not need to be micro managed this way and this rule was clearly put into place by someone who has no idea what it is like to work in a hospital/health care setting. I am happy to give real time examples of why and how this rule does benefit the nurse and the patients if you feel that this would be helpful.

Thank you,

Heather Arzie RN, BSN, CPN

## Seiler, Erin

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**From:** Lizzy Bullock <bullock.lizzy@gmail.com>  
**Sent:** Tuesday, May 11, 2021 2:22 PM  
**To:** Seiler, Erin  
**Subject:** BOLI

Hi!

My name is Lizzy Brown, and I am a bedside RN who works 12-hr shifts. The law requiring us nurses to take a lunch break within the first 12 hours of my shift makes my lunch shift a burden. I work the night shift, meaning my hours are 7PM to 7AM the next day. For me to squeeze in my lunch break, I have to take it before 1AM, meaning, sitting at the lunch table by 12:30 AM to finish my break by 1AM. In the mad rush of taking care of patients, getting them ready for bed, explaining procedures, giving medications, communicating with family, talking to doctors, etc. I have to figure out when I can take a break, which in reality becomes more of a stressor, than a break. Everything in the night shift happens before 1AM and fitting a break into that period isn't what I feel is healthy for me, or my patients, I would appreciate to take a break when I feel like I can actually relax, and when I know I am not neglecting my patients.

I would love if this law changed. It would help me feel more satisfied on my job and ensure better patient care as well.

Thanks,  
Lizzy

**Seiler, Erin**

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**From:** Cossey, Chanelle A :LMP Medical Specialties <CHCOSSE@LHS.ORG>  
**Sent:** Tuesday, May 11, 2021 11:47 AM  
**To:** Seiler, Erin  
**Subject:** Bureau of Labor and Industries: Petition for Rulemaking on OAR 839-020-0050.

To whom it may concern,

My name is Chanelle Cossey and I am a Registered Nurse at Legacy Meridian Park Hospital. I am proposing a rule change to allow healthcare employers more freedom in the timing of scheduled meal breaks for employees. Staff, including myself, who work in unpredictable patient care environments and for greater than 12-hour shifts are petitioning to be exempt from the 3-6 hour lunch break rule. As a nurse, my first priority is the safety and wellbeing of my patients. Ensuring myself and other staff complete their lunch break prior to the 6th hour of our scheduled shift can impede on patient care. Please consider this rule change.

Thank you,

Chanelle Cossey, RN, MSN  
chcosse@lhs.org

**Seiler, Erin**

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**From:** Carlile, Morgan A :LMP Med Surg ICU <MCARLILE@LHS.ORG>  
**Sent:** Tuesday, May 11, 2021 4:57 AM  
**To:** Seiler, Erin  
**Subject:** Petition for OAR 839-020-0050

To Whom it May Concern,

I am writing to share my concerns with OAR 839-020-0050 and its applicability to 12- hour shifts. I work as a nurse doing 12-hour night shifts and it is extremely hard to get to a lunch before 1:00AM in order to abide by the law to take it within the first 6 hours of my shift. The beginning of the shift and those first 6 hours are some of the busiest and it is very inconvenient and sometimes impossible to stop what I am doing to go and clock out for a lunch by 12:30AM to be back by 1:00AM. It not only causes more work for my coworkers who have to pick up my assignment while I am away on lunch, but it also inhibits my ability to actually relax during my break because I am thinking of the things that need to be done when I return.

Please consider extending the time in which 12-hour shift workers are required to take their lunches. Thank you for taking the time to hear my thoughts.

Sincerely,

Morgan Carlile

**Seiler, Erin**

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**From:** Brown, Tatyana :LMP Med Surg ICU <TATBROW@LHS.ORG>  
**Sent:** Tuesday, May 11, 2021 3:42 AM  
**To:** Seiler, Erin  
**Subject:** Petition for rulemaking on OAR 839-020-0050

From Tatyana Brown, RN, IMCU unit, Legacy Meridian Park Medical Center.

Please, add my voice to end the practice of forcing nurses and nursing assistants to take their 30 min lunch within the first 6 hours of a shift start. It makes sense for an 8-hour working day, but it absolutely does not work for a much longer 12-hour shift that most bedside nurses in a hospital setting work. I get hungry later in my shift, but I can not enjoy a meal break after 1 pm or 1 am.

I am sure the original intent of this law had good intentions, but as an old adage goes "the road to hell is paved with good intentions". Please, lift the restrictions and give the nursing staff the freedom to decide when they feel like eating a meal. Again, it is not an 8-hour, but a 12-hour shift, and we would like to take our meal breaks a little later, rather than be forced to eat in the first part of the shift and then starve the rest 6 or 7 hours until we get home.

Thank you for giving me the option to express my opinion. I hope a change for the better can be made.

Tatyana Brown  
tatbrow@lhs.org



**Seiler, Erin**

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**From:** Moore, Susan J :LMH Respiratory Therapy <SJMoore@LHS.ORG>  
**Sent:** Monday, May 10, 2021 10:55 PM  
**To:** Seiler, Erin  
**Subject:** OAR 839-020-0050

I am an RT for Legacy Health and I just wanted to offer my point of view on the 6 hour rule for lunch breaks. I work a 12 hour night shift, and often I am not ready for my lunch before 12:30 am, or patient care surges unpredictably, through no fault of my employer, and patient care must come first. I would like to be exempt from the rule that I must take my mealbreak before the 6th hour of my shift. Thank you.

**Seiler, Erin**

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**From:** Trofitter, Bonnie L :LEH PCCU <BTrofitt@LHS.ORG>  
**Sent:** Monday, May 10, 2021 4:49 AM  
**To:** erin.seiler@stae.or.us  
**Subject:** ruling on OAR 839-020-0050

My name is Bonnie Trofitter RN

I am writing to say that as a 12 hour night shift worker in a hospital, it is not always possible to take a break in the first 6 hours. Conversely if I did get my break lets say at the 5th hour of my shift i would then work another 7 hours without a lunch break. This rule for meal times was based on an 8 hour work day and should be brought up to date to acknowledge that

thanks

blt rn  
legacy emanuel hospital

## Seiler, Erin

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**From:** Duncan, Sara A :LSO Float Pool <SDUNCAN@LHS.ORG>  
**Sent:** Sunday, May 9, 2021 7:46 AM  
**To:** Seiler, Erin  
**Subject:** Lunch break times for Nurses

Hello Erin,

I was given your email to voice my opinion about having to take our lunches within the first 6 hours of our 12 hour shift. There are so many reasons that this is harmful to RNs and CNAs working these long shifts. First, in order to get everyone's lunch done on time, we are having to start lunches as early as 11am. This means that person has 8 hours before they get more than a 15 minute break. If we just had breakfast prior to work, around 6:30am, that is only a few hours later to have our lunch. Unless we are able to start having two 30 minute breaks, this seems backwards. There are many times when we simply are too busy or have an emergency and are unable to take our breaks within this 6 hour window. I don't believe other emergency workers have to follow the same rules ie firefighters, policeman, EMTs etc. Lastly, mornings are the busiest times for RNs (or the beginning of noc shift) and many of us are too stressed to sit down and eat a meal that will last us until the end of our shifts. It is simply awful to take lunch so early and have 7-8 hours of our shift left. Please consider changing our lunch time rule.

Thank you

**Sara Duncan RN, BSN, CMSRN**  
**Med/Surg Resource**  
**Legacy Health**

## Seiler, Erin

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**From:** Meuler, Danielle L :LSO Float Pool <DMEULER@LHS.ORG>  
**Sent:** Thursday, May 6, 2021 11:17 PM  
**To:** Seiler, Erin  
**Subject:** Petition for rulemaking on OAR 839-020-0050

Erin,

I am a nurse at Randall Children's Hospital and I would like to share my thoughts on the current law that mandates us take our lunches within the first 6 hrs of our shift. I can totally understand this law and appreciate it for 8 hr shift employees but since most of us at the hospital work 12 hrs shifts, it hurts us more then helps us. When I work a 12 hr shift I like to take my lunch after my midnight cares since my patients get VS/Assessments every 4 hrs and I like to finish my midnight cares and get them charted before I can really enjoy my break which is not possible when I have to take my lunch by 12:30 to be back my the 6th hour of my shift. I also get more tired on a full belly and if I eat early in my shift, I have a harder time staying awake throughout the night which is not good for my patients. I appreciate setting up laws to make sure we get our breaks appropriately but being required to take my lunch during the first half of my shift makes is more of a hinderance. I would fully support requiring a lunch break by the 8th hour of a 12 hr shift but 6 hrs is not reasonable and does more harm then good. I feel giving us a little more flexibility on the time would allow us to do the care we want to provide while also being able to take care of our well being. Thank you for your time.

***Danielle Meuler, RN-BC, BSN* | Randall Children's Hospital - Legacy Emanuel**

Pediatric Resource Pool Orientation Coordinator  
cell: 360-356-6350 | e-mail: [dmeuler@lhs.org](mailto:dmeuler@lhs.org)

**Seiler, Erin**

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**From:** Wolfe, Aster :LMH Med Surg ICU <ANDWOLF@LHS.ORG>  
**Sent:** Thursday, May 6, 2021 10:06 PM  
**To:** Seiler, Erin  
**Subject:** Comment on Petition for Rulemaking on OAR 839-020-0050

Hello Erin,

I am a registered nurse working in intensive care in a hospital in Portland, Oregon. I would like to share my thoughts related to proposed changes to regulations governing mandatory breaks & lunches in healthcare settings. The current regulations that require workers to take their lunch break between the third and sixth hour of their shift are not appropriate for healthcare workers performing direct patient care, especially those of us that work 12-hour shifts. As registered nurses in hospital settings, our job role requires us to be accountable for the well-being of our patients who are acutely or critically ill. This role means that our ability to take lunches and breaks is dependent on the continually changing needs of our patients. There are times when we need to postpone a break or lunch until later in a shift in order to provide safe and appropriate patient care, especially when caring for patients receiving time-sensitive treatments or who are critically unstable. It is also our responsibility to assure we have proper coverage for patient care from another RN to take our breaks, which this three-hour window does not allow if any changing patient needs arise in a shift.

I fully support the proposed changes that will allow healthcare settings to be exempt from current regulations governing the timing of mandatory breaks and lunches within shifts, allowing healthcare organizations to adopt clear written policies that allow for more flexibility in break times. Please feel free to contact me with any questions regarding my experiences related working as an RN in a direct care environment.

"Aster" Andrew Wolfe, BSN, RN

**Seiler, Erin**

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**From:** Walker, Braden J :LSO Float Pool <BRWALKE@LHS.ORG>  
**Sent:** Thursday, May 6, 2021 6:59 PM  
**To:** Seiler, Erin  
**Subject:** Mealtime scheduling

This email is regarding Petition for rulemaking on OAR 839-020-0050.

My name is Braden Walker and I am a registered nurse. I just wanted to write to make sure that I could say that I did my part in getting our mandatory mealtime changed. As a nurse, I work a 12.5 hour shift. Taking my lunch in the first six hours is not usually practical. There are several nurses that need to go to lunch on any given unit, and we can not all go at the same time. In order for the last nurse to be back by the six hour mark, 1 PM in my case, the first nurses have to start taking lunch by at least 11 am. If I go to lunch at 11 am and get back at 11:30 am, I have 8 hours left on my shift. That is the length of a normal work day. So now I have 8 hours remaining in my shift and will not have another meal break. This is just the time breakdown of why going to lunch at this time isn't reasonable. The first 4-6 hours of a nurses shift also tend to be the busiest time as well. I appreciate that this is being reviewed, and I hope that my fellow nurses will reach out so that change can be made. Thank you for your time.

Braden Walker

**Seiler, Erin**

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**From:** Ashlee Colby <ashleekcolby@gmail.com>  
**Sent:** Thursday, May 6, 2021 3:42 PM  
**To:** Seiler, Erin  
**Subject:** BOLI Lunch Rules

As a bedside nurse, I would advocate for this change to be allowed. I appreciate BOLI's attempt to protect workers, but the current rules just do not make sense for someone working a 12 hour shift. I have no desire to eat my lunch and/or take my longer break 3 hours into my shift. I prefer to take my lunch later in the day, often after the 1pm time frame.

I support organizations being able to adopt clear policies about their practices. This could still allow for protection of the worker, but would give more flexibility to those working in these roles. I view this similar to what union organizations currently do.

Ashlee Colby, RN- Ped, BSN  
Randall Children's Hospital  
Portland, OR

**Seiler, Erin**

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**From:** Kuschnick, Traci L :LMP Patient Access <TKuschni@LHS.ORG>  
**Sent:** Thursday, May 6, 2021 7:17 AM  
**To:** Seiler, Erin  
**Subject:** Petition for Rulemaking on OAR 839-020-0050

Requesting more flexibility in clocking out for lunches. I work in a hospital environment, and it can also be a patient safety issue when having to take our lunches early.

It can be hard to take a lunch before a specific time, when giving patient care. Plus, if picking up an extra shift, it can make for a long day.

Many shifts in the hospital are 12 hours.

Thanks for considering this.

Traci Kuschnick



**Seiler, Erin**

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**From:** Long, Sydney J :LEH Emergency Services <SLONG@LHS.ORG>  
**Sent:** Wednesday, May 5, 2021 11:14 AM  
**To:** Seiler, Erin  
**Subject:** Petition for Rulemaking on OAR 839-020-0050

we would like to have control over our break times at Legacy Emanuel ED.  
Syd Long, RN

**Seiler, Erin**

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**From:** Weaver, Jordan W :LMH Medical Specialties <JOWWEAVE@LHS.ORG>  
**Sent:** Tuesday, May 4, 2021 8:36 PM  
**To:** Seiler, Erin  
**Subject:** Petition for Rulemaking on OAR 839-020-0050.

Due to the nature of health care worker's workflow, it is very difficult to consistently have a meal break before the sixth hour of work. I feel the mandatory time frame needs to be more flexible. A good idea would be to allow a meal break up to the beginning of the 8th hour if a 12 hour shift is worked. This would allow the health care staff to provide the very best care while taking care of themselves.

Thank you,  
Jordan Weaver, RN.

## Seiler, Erin

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**From:** Warr, Tammy :LMH Medical Specialties <TWARR@LHS.ORG>  
**Sent:** Monday, May 3, 2021 11:31 PM  
**To:** Seiler, Erin  
**Subject:** Rulemaking OAR 839-020-0050

Hello,

I just wanted to reference the Petition for Rulemaking on OAR 839-020-0050. When working a 12-hour shift, I find that very few people are hungry enough to take thier lunch as early as 3-4 hours into thier shift. More importantly, the beginning of the shift is often the busiest; so not only are the staff not physically ready for a lunch break, their workload also doesn't indicate time to take 30 minutes off the floor. I realize the importance of mandating workers get a lunch, but insisting that break be taken a few hours after they start thier shift, leaving several hours before the end of the shift without having that break to rest and refuel, when they actually have the time and the need for said break, becomes difficult and frustrating.

Thank you so much for taking the time to hear me out. I appreciate your time and consideration.

Thank you

**Seiler, Erin**

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**From:** Cummings, Bert :LMH Respiratory Therapy <RCUMMING@LHS.ORG>  
**Sent:** Monday, May 3, 2021 12:48 PM  
**To:** Seiler, Erin  
**Subject:** Petition for rulemaking on OAR 839-020-0050

I have been a healthcare worker for over 30 years, and as a respiratory therapist, we are often needed at the drop of a hat to help with patients. I have always taken my lunches around 1300 as this is a more quiet time between treatment rounds, as well as I'm not usually ready to eat lunch until then, being forced to eat at 1100 when I'm not even hungry, but we have to get everyone done eating by 1230, is a royal pain. We used to be able to be more flexible and I know a lot of people in my department feel that they would like a little more flexibility as well. I could see if we did an eight hour shift, where that would be more plausible, but we do twelve hour shifts, if I eat at 1130 and I have to wait to eat at 1930 when I get home, that is 8 hours between meals.

Please consider making more flexibility for our lunches as I know a lot of people who do not like having to have their lunches to darn early.

Sincerely,  
Roberta Cummings, RRT  
Legacy Mount Hood Medical Center

## Seiler, Erin

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**From:** Hinds <hindsites@comcast.net>  
**Sent:** Monday, May 3, 2021 9:19 AM  
**To:** Seiler, Erin  
**Subject:** Petition for rulemaking on OAR 839-020-0050

I am a registered nurse and work in an LDRP unit. If you do not know what LDRP means you have no business passing a law dictating when and how I take my breaks. I am also an neonatal resuscitation RN attending deliveries. I do not work at a desk and rarely sit longer than 10-15 minutes before getting called to a patient room. If you have ever been in labor you can relate to the comfort your nurse brings to you when she is by your side when times are rough (happens every 3-5 minutes lasting 60-120 seconds for up to 10 hours). You also understand that the delivery of a baby can happen suddenly or take a long time, depending on the situation. Having a familiar person with you, that you have bonded with and trust, during those crucial moments is important. Likewise, if that baby comes out needing additional support to breathe, it is crucial that an experienced nurse with those critical resuscitation skills is present and vital. Saying "but wait! I'm on my break" is not an option.

Telling me that I MUST take a 15 minute morning break, followed by a 30 minute lunch break before noon, followed by two 15 minute afternoon breaks, none of which may be combined is unreasonable and unrealistic. When you have 10 people all trying to get a lunch break in before noon, it means that some people have to end their breaks by 10:30 or 11:00, leaving up to 8 hours before they go home. It can mean they are not present for their patient when she delivers or if something goes haywire or bad. It does not feel good for the patient or the nurse caring for her and/or the baby. I understand that this law is to protect nurses who may feel bullied into not taking their breaks in a reasonable time frame. I get it and can appreciate the point. But it cannot be a blanket law that is universal for all nurses and all units. I am an adult and can advocate for my own breaks when I feel it is appropriate to take them. In our hospital, on our units, we have Practice Councils that help to govern these kinds of matters. Create a law that makes the hospital system follow the Practice Council's recommendations. And while you are at it you could do this:

Anti-vaccers go to the end of the line for care if they refuse vaccinations

No mask? No service. Just like shirts, pants and shoes.

Thank you for your work and service. I know you all are trying to do the right thing.

Frances Johnston-Hinds, BS, RN, IBCLC

**Seiler, Erin**

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**From:** Russell, Shannan E :LMH Medical Specialties <SERUSSEL@LHS.ORG>  
**Sent:** Sunday, May 2, 2021 2:04 PM  
**To:** Seiler, Erin  
**Subject:** Opinion Regarding Petition for Rulemaking on OAR 839-020-0050

Hello. Thank you so much for taking opinions on this matter. As a nurse working 12-hour day shifts, taking a lunch prior to the 6-hour mark is very difficult. My patients' needs come first which means around the 6-hour mark of my shift I am helping them with lunch and giving medications. I am also in a position that is full of uncertainty leading to me having to be flexible with my time for whatever emergent situation arises that needs my attention. We do use a team method, but the goal is not to place the burden of care on others while we are gone, only that if something were to happen that there is someone there. Moving the required lunch break time by even 2 hours to the 8-hour mark ensures that we would be able to provide optimal care to our patients and be able to take a break without worry that others will have to take responsibility for our primary duties while also completing their own tasks.

Again, thank you for taking opinions on lunch break requirements. A change is greatly needed for our patients to receive appropriate care.

Sincerely,  
Shannan Russell, RN  
Medical Specialties LMHMC

**Seiler, Erin**

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**From:** Murray, Betsy :LMH Respiratory Therapy <BMURRAY@LHS.ORG>  
**Sent:** Saturday, May 1, 2021 11:18 AM  
**To:** Seiler, Erin  
**Subject:** reference OAR 839-020-0050

REF: OAR 839-020-0050

To whom it may concern,

Please consider allowing health care workers have more flexibility to take there lunches when it is more convenient for them. Health care schedules and patient care needs are unpredictable. It is better have continuity of patient care than to have a scheduled lunch period.

Thank you for your consideration and time.

Betsy Murray, RT

**Seiler, Erin**

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**From:** Andrus, Josh :LMH Medical Specialties <JANDRUS@LHS.ORG>  
**Sent:** Saturday, May 1, 2021 1:02 AM  
**To:** Seiler, Erin  
**Subject:** OAR 839-020-0050 feedback

Giving feed back on OAR 839-020-0050 from the perspective of a 12 hour nurse. Our days (or in my case nights) are very unpredictable and requiring us to take a 30 min lunch break within the first 6 hours of a 12 hour shift does not make sense. Much of the time it is the first several hours of our shift that are the busiest, which is when we are being asked to take this break. It would make more sense to me to allow us to just take it anytime we choose to as long as we take it. For me the ideal time is in the 2-3am range (hour 7-8 of my shift). I always get my breaks. It's never been an issue for me. Give us options, please. Thank you.

-Joshua Andrus, RN



**Seiler, Erin**

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**From:** Briggs, Adam M :LMP Patient Access <ABRIGGS@LHS.ORG>  
**Sent:** Friday, April 30, 2021 1:24 PM  
**To:** Seiler, Erin  
**Subject:** Petition for Rulemaking on OAR839-020-0050

I sign this petition  
Adam Briggs

**Seiler, Erin**

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**From:** Gard, Valerie G :LMP Patient Access <vgard@lhs.org>  
**Sent:** Friday, April 30, 2021 10:36 AM  
**To:** Seiler, Erin  
**Cc:** Gard, Valerie G :LMP Patient Access  
**Subject:** Petition for rulemaking on OAR 839-020-0050

Hello,

My name is Valerie Gard. I wanted to let you know that as a patient access representative our break time rules do not work for us.

There are times that we are checking in patients and cannot just stop to take a break in the middle of the registrations. We always take our breaks but it would be much better to have flexibility for the time frames.

Please consider this when looking at this rulemaking

**Seiler, Erin**

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**From:** Scheer, Tonya S :LMP Patient Access <TScheer@LHS.ORG>  
**Sent:** Friday, April 30, 2021 9:28 AM  
**To:** Seiler, Erin  
**Subject:** Petition for Rulemaking on OAR 839-020-0050

Requesting more flexibility in clocking out for lunches. Working in a hospital environment it can be hard to take a lunch before a specific time when giving patient care. Many shifts in the hospital are 12 hours, and having to take lunch by a certain time can then make for a long day.

Thanks for considering this.

Tonya Scheer

## Seiler, Erin

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**From:** Rhodes, JR :LEH Medical Acute Care Unit <JARRHODE@LHS.ORG>  
**Sent:** Thursday, April 29, 2021 2:51 PM  
**To:** Seiler, Erin  
**Subject:** Public comment for a petition

Hi there! My name is J.R., I'm a med/surg nurse at Legacy Emanuel Hospital. I was made aware of the Petition for Rulemaking on OAR 839-020-0050, talking about removing the required time in the shift before which a lunch break must be taken. I'd like to submit my thoughts as part of the consideration. Thank you for taking this on!

In short, the current law is restricting and obnoxious, in particular for a 12-hour shift.

**-It's not in the best interest of our patients:**

Patients have discharges, procedures, and any number of other needs that come up on a daily basis. If those needs are delayed because staff members are forced to take lunches before a certain time and there is less staff available to help, at best it is inconvenient for the patient and at worst it could be life-threatening. Obviously no staff member lets something like that happen, because they prioritize patients over making sure they get a lunch within the time restraint; but delays on minor things do happen.

**-It's not in the best interest of staff members:**

This law has come up in numerous conversations and I have yet to hear support for the idea of not being able to elect for ourselves when it is most strategic based on task/patient situations, or simply convenient, to eat. By and large we do our due diligence to adhere to the time restraint but depending on the day, as was suggested above, staff members routinely put off lunch for later than is required. Sometimes it's for patient safety, sometimes it's for other needs like keeping up with charting (documenting patient care) and not falling too far behind. Going to lunch earlier in the shift additionally requires staff members to coordinate with each other so that not only are they taking into account their own patients' needs, but the other staff members' situations as well- and then sandwiching those breaks so that absolutely everyone eats within that timeframe- while still keeping in mind our minimum staffing ratio. Once all lunches are done, at 1 PM at the latest per the restriction, the next time we are likely to eat is after we get home at 8PM (8 AM for night shift). Bottom line, guaranteeing a lunch is important but there's no part of the time restriction that is staff-oriented.

**-It's not in the best interest of healthcare organizations and I'm sure other entities under the same restriction:**

On top of all that, even though most people don't even want to eat as early as 10:30 or 11:00, Legacy gets the blame and hefty fines for not 'guaranteeing' lunch soon enough. If I remember right Legacy got fined \$5 million a couple years ago. I can't help but wonder what all Legacy could have done with the money if it hadn't been taken away for such a silly rule. The reality is Legacy has nothing to do with when people take lunch. Lunchtime is dictated by patient needs and when the staff member feels it is best to go. Laws or no laws that's how it works practically, and really it's how it should be.

I'm not someone who likes to make demands or expect things just because I want them; my goal is more to offer the opinion/perspective that this time restriction simply makes no sense. Few things align where all parties can benefit from a change, this is one of those things and I know healthcare companies and workers

alike would appreciate being released from this restriction. Patients wouldn't necessarily know the difference but would obviously stand to benefit from happier, less time-restricted caretakers.

Thank you again for the consideration!  
J.R. Rhodes RN

**Seiler, Erin**

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**From:** Hein, Sue :LMP Patient Access <SHEIN@LHS.ORG>  
**Sent:** Thursday, April 29, 2021 12:14 PM  
**To:** Seiler, Erin  
**Subject:** PETITION FOR RULEMAKING ON OAR-839-020-0050

Hi Erin,

I have worked 12 hour shifts in the ER for the last 11 years and find that having to take a lunch break 3 hours into my shift very frustrating. I am only a quarter through my work day, with 9 hours left in my shift, and I take my longest break between 9 and 10.

I know this policy is to protect employees, but working in an ER we have to have flexibility. The Emergency Department can be extremely busy. We do not have set appointments. Please consider giving more flexibility to employees regarding or breaks.

Sincerely,

Susan Hein, Patient Access

## Seiler, Erin

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**From:** Jones, Simone D :LMP Patient Access <SDJONES@LHS.ORG>  
**Sent:** Thursday, April 29, 2021 11:44 AM  
**To:** Seiler, Erin  
**Subject:** Petition for Rulemaking on OAR 839-020-0050

I am in favor of this petition, regarding the regulation of the specific time breaks are required. My department I work within need the leeway on when to get our breaks in.

The number of breaks are important or the amount of time, not when they are taken.

**Seiler, Erin**

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**From:** Korman, Karyn C :LMH Respiratory Therapy <KKORMAN@LHS.ORG>  
**Sent:** Thursday, April 29, 2021 11:02 AM  
**To:** Seiler, Erin  
**Subject:** Petition for Rulemaking on OAR 839-020-0050

Hi Erin,

My name is Karyn Korman. I am a respiratory therapist at Legacy Mt Hood Medical Center. I am taking this opportunity to ask for flexibility on the rulemaking to have our lunch period from the 3rd hour of our shift and complete before the 6 hour marking. Working in the medical field and working 12 hour shifts this time period does not work for us. We are forced to take a lunch period and we still have 6.5 hours left in our shift. Most people are not ready to eat at this time and it create problems. We attend most emergencies in the hospital and if we have several during the lunch period we find ourselves short handed because we are obligated to get people to lunch before a specific time in the day. Our shift is 0630-1900. we have to have lunch complete by 12:30. we typically have 3-5 RTs on staff a shift. We are to hand off our phone and have an uninterrupted 30 minute meal period. We need to flexibility to handle emergencies and accommodate peoples healthy eating habits working a 12 hour shift. please consider letting 12 hour health care workers eat when is best for them.

Thank you,

Karyn Korman  
503-784-7529



**Seiler, Erin**

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**From:** Gillingham, David P :LMH Respiratory Therapy <DGilling@LHS.ORG>  
**Sent:** Thursday, April 29, 2021 7:36 AM  
**To:** Seiler, Erin  
**Subject:** OAR 839-020-0050

I am a Respiratory Therapist working for Legacy Health. Please consider relaxing the lunch break rules requiring lunch being taken prior to 6 hour mark of a 12 hour shift. As an RT in the hospital we respond emergently throughout our shift to patients' needs. Having to break at the 6 hour mark is too rigid a timeline. It forces staff to interrupt patient care at inopportune times. We need more flexibility to our work schedule throughout a 12 hour shift, similar to other first responders.

Thank You, David Gillingham

**Seiler, Erin**

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**From:** Russell-payne, Michelle L :LMH Director Interim <MRUSSELL@LHS.ORG>  
**Sent:** Thursday, April 29, 2021 7:24 AM  
**To:** Seiler, Erin  
**Subject:** OAR 839-020-0050

Please approve this new proposed law. The majority of my staff work 12 hour shifts and they want the flexibility to take their lunches a bit later in the shift. I appreciate your consideration for this proposal.

Thanks,  
Michelle

Michelle Russell-Payne  
Interim Director of Clinical and Support Services  
Mount Hood Medical Center  
Phone: 503-674-1495 Cell: 360-901-8069

**Seiler, Erin**

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**From:** Mckinney, Patrick D :LEH Emergency Services <PDMCKINN@LHS.ORG>  
**Sent:** Wednesday, April 28, 2021 6:27 PM  
**To:** Seiler, Erin; Bray, Corena J :LEH Emergency Services  
**Subject:** Comment regarding petition for Rulemaking on OAR 839-020-0050

I current work as a Trauma Resuscitation Nurse at a busy Level 1 trauma center. I work here because I enjoy caring for others in their most critical and dire situations. Many of these situations are life threatening and involve time sensitive and complicated tasks. This has been compounded with COVID. Being forced to handoff report to someone unfamiliar to the current situation in the middle of a trauma, stroke, or respiratory emergency is both dangerous and unreasonable. My employers have always worked to get me my breaks regardless of the law. We are not labeling cans on an assembly line. We are saving people's lives. Please allow us the flexibility we need to take care of both our patients and our selves.

Patrick Mckinney RN-CEN

## Seiler, Erin

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**From:** Baker, Jennifer A :LMH Mgr Imaging Services <JENBAKER@LHS.ORG>  
**Sent:** Wednesday, April 28, 2021 10:05 AM  
**To:** Seiler, Erin  
**Subject:** Petition for Rulemaking on OAR 839-020-0050.

Hello,

I am writing regarding the petition for changing the meal period timing for healthcare workers.

I support the petition to loosen the rules regarding the timing of meal periods for healthcare workers. Often medical personnel work greater than 8 hours , and current rules require meal periods to be taken early in the shift (between 3rd-6<sup>th</sup> hr) and are not necessarily timed with the employee's rest needs. Most importantly, in the healthcare setting, we cannot always take our meal periods during this window due to the immediate needs of the patients.

We are asking for more flexibility for when meal periods are taken.

Thank you for your consideration of this petition

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**Jennifer Baker, BS RT (R)(CV) | Manager Imaging Services | Legacy Health**

Mount Hood Medical Center | 24800 SE Stark St. Gresham, OR 97015 | 503-674-1478 | [jenbaker@lhs.org](mailto:jenbaker@lhs.org)