

**March 18, 2019**

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**RE SB 762**

Chair Senator Prozanski

Vice Chair Senator Thatcher

Senator Bentz

Senator Fagan

Senator Gelser

Senator Linthicum

Senator Manning

I live with Bipolar 2 Disorder. My son lives with Bipolar 1 Disorder and has been diagnosed on the Autism Spectrum. I have faced challenges as a parent wanting to get care for her son and in accessing care for myself. Also, I have worked in Oregon's child and adult mental health care systems. The former as a Family Peer Support Specialist and the latter as a Peer Support Specialist. I was the Statewide Training Coordinator for Oregon Family Support Network and in 2008-2009 I was a member of the Project Team for implementing the Governor's Wraparound Initiative. I was connected with providers, families, and young people across the state. I was employed by the Oregon Center of Excellence for Assertive Community Treatment and connected with ACT team staff and participants across the state. Currently I work at the Oregon State Hospital and work with people of all commitment types.

My experience in using and working in both our child and adult behavioral health systems leads me to believe our systems are fundamentally flawed in many ways and require a close analysis of our systems, across the lifespan. As well as how these systems intersect and operate with other systems.

My understanding of SB 762 is that it will increase the wait time for a civil commitment hearing from 5 days to 15 days, and does nothing to address challenges in accessing services/supports in the community that may have prevented someone from getting to such a crisis point in the first place. There are also concerns that the person's due process rights will not be met or at best will be compromised under the proposed changes.

If one considers that most people "wait" in a community hospital setting, at a conservative cost estimate of \$1000/day. That will be \$10,000/civil commitment hearing in additional costs. Also, as an advocate, parent, and person at risk of civil commitment, the compromised due process rights in SB 762 are alarming.

I ask that this committee does not pass SB 762, and considers significantly amending SB 374, which sits with this committee, but has not had a hearing yet, to create a task force that takes a comprehensive look at how our behavioral health care system is funded, operates, and intersects with other systems, such as judicial and corrections, the psychiatric security review board, housing and self-sufficiency, aging and people with disabilities, child welfare, etc. We desperately need change across the lifespan that SB 762 does not adequately address.