

March 25, 2019

To: The House Business and Labor Committee and the Senate Workforce Committee

From: Marchel Hirschfield

Re: Support of HB 3031

Dear Chair and Members of the Committee,

My name is Marchel Hirschfield and I live in Portland.

During our normal night routine in September 2016 I played with my youngest son Kenji who was 9 months old at the time. I noticed immediately that something in his leg was bothering him and something pushed me to take him to the Emergency Room. Since there was no excruciating pain that Kenji was experiencing, we were at the end of the priority list. We were seen later that night and they completed X-rays, Ultrasounds, and other tests, but could not find the source of his pain. Finally early in the morning they did an MRI and a fluid test. After 10 hours in the hospital, we found out he had a highly infectious disease: MRSA. They told us that Kenji had to be the first operation of the morning where they would cut open his thigh and remove the abscess. At the time, I was working as an administrative assistant for a commercial janitorial and holiday lighting company making \$13/ hour and I was the main source of income for my family. My job offered no sick time, vacation, or empathy. While calling out of work, I could hear the frustration as they listed off items that I needed to still get completed while out of the office.

While Kenji was in the operation room at Doernbecher Hospital, the Infectious disease team informed us that they would set us up in a room because we were expected to be in the hospital for at least one week. There was one reclining chair that made it impossible to sleep throughout the night which honestly didn't matter anyway because every hour either a nurse, student, doctor, or infectious disease specialist came into the room. It was claustrophobic and I was living in the same pair of leggings and tshirt. Every visitor had to completely cover themselves in scrubs- I felt like my vision blurred and my answers became automated to the same questions I was being asked. "Are you ok?" "Do you have questions?" "Do you need anything?" I couldn't even tell who was the real doctor and who was the student at this point. When Kenji returned from his operation we couldn't even hold him. Kenji's entire arm was covered to protect the many wires running through his body. Every hour the nurse would come in to take vials of blood from his foot to get it tested to ensure the antibiotics was killing the MRSA infection. The bottom of his foot became stamped with little bandaids.

Since my husband Aviel and I have two older boys, Aviel stayed at home with the boys and I decided to stay by Kenji's side. By this time we were going into week 2 in the hospital and my employer was irate. They demanded that I make time to come into the office since Kenji was considered stable because we were approaching their busy season. Not knowing my rights with FMLA and worried about my family's future

income I started going back to the office. I had to leave my 10 month old son in the NICU so I could get a paycheck.

Finally after 2 ½ weeks we were discharged home and waited for Corum. Corum would be training my husband and I to administer IV antibiotics through a PICC line every 6 hours for the next 3 months. Additionally Kenji needed to go to OHSU every week to have his blood retested. I was exhausted, financially and emotionally stressed out. I would communicate to my employer that I was running late due to the IV antibiotic schedule or needing to do another bandage change on his incision. Some days one of the owners would text me and say "Do we need to hire an admin assistant to be here the 10 minutes you are late?" Or "Do you not understand what your start time is?" I was so scared to lose my source of income especially since our family had no type of emergency savings fund set up that I would reply apologetic and stay a little late at the office to catch up.

The day before Thanksgiving, we had family over when suddenly there was a knock at my door. I opened the door and there were two police officers and a woman who introduced herself as Linhda from DHS. Apparently we had missed one of Kenji's appointments at OHSU and that resulted in a phone call to DHS for possible medical neglect. The two officers had to escort Linhda, Kenji and I to my bedroom in front of our house guests to check on his wound and overall health. I was livid! One missed appointment resulted in DHS being called, but it wasn't severe enough to my employer to provide me time off so that I could dedicate 100% to the recovery of my son. The emotional stress that filled my heart began to make my body ache. I was exhausted. I started to second guess my parenting abilities because I felt like that visit from DHS was an indicator that I was failing as a parent.

Like always I sucked up all the emotion and tucked it in the back of my mind. In survival mode I followed up with OHSU and DHS on Monday with all my documentation and records that I have and know how to properly care and advocate for my son. I filed a grievance with OHSU for not properly following their protocols to get in touch with families for appointments and I sent Linhda documentation for every single phone call and voicemail I left with OHSU. Within 3 business days Lindha emailed me back to let me know the DHS case was being closed because it was apparent that I had my son's best interest in mind. The hurt that it was even questioned in the first place has never disappeared. No parent or family member should ever be additionally stressed about their employment safety and then further put into a position where they cannot adequately take care of someone where it is deemed medically necessary. Kenji deserved 110% of my attention. All of your children, parents, and other family members deserve 110% of your attention if they were to become ill and therefore we need FAML I Equity now!

Sincerely,

Marchel Hirschfield