



March 9, 2021

Chair Dexter, Vice Chair Hayden, members of the committee, for the record my name is Kyndall Mason; I am a political and policy strategist for SEIU Local 503, focusing on long term care. SEIU represents more than 30,000 long term care workers, in various service settings including facility based and home and community-based care settings. I am submitting this testimony on behalf of those members in support of HB 2327.

Long term care facilities were some of the hardest hit by COVID-19, not just because of the vulnerable population and the congregate style living, but because the industry, and the state, were woefully underprepared. People working in long term care facilities spent the first few months of the pandemic trying desperately to secure PPE. We heard many stories about having to wear trash bags in lieu of aprons, and towels in place of masks because there simply was not enough PPE.

Then, in September, wildfires ripped through our communities displacing people from both fire and smoke danger. During a pandemic, workers inside these facilities rushed to evacuate and still care for residents, many while praying their own homes were spared. Again, the lack of preparedness, despite increasing wildfire destruction was clear as family members, who were already restricted in accessing their loved ones, now had no idea where their loved ones were.

The stories from the past year, while exceptional in nature, are not the exception when it comes to disaster and pandemic preparedness and planning. COVID-19 finally shined a light on the cracks in the system we have been pointing out for years. It is why our members moved to pass legislation that would prevent this level of ill-equipped tragedy from happening again.

SB 434 & 435 were the vehicles we intended to use to make change in long term care, until we were presented with the work OCHA had started. It was clear that there was a natural alignment in being prepared and keeping everyone in a long-term care facility safe. Over the last several weeks we have worked closely with OHCA and many other stakeholders to create what, we believe, is a very strong bill regarding safety measures and a thoughtful eye towards the future of long-term care.

Nearly every provision of SB 434 & 435 was amended into HB 2327, in the -3, some of which includes clear PPE standards, virtual inspections and visitation, updated pandemic and natural disaster planning protocols and translation of materials for workers who speak languages other than English. HB 2327 builds on these action items through its creation of the Team.

Early in the pandemic it was hard for anyone to get a clear answer on expectations, preparedness and next steps. Cross agency communications were unclear and often hard to reconcile in the onset of this pandemic, despite the very nature of congregate care requiring licensing from various regulatory agencies. The Team creates the ability for OHA, DHS, APD, residents, workers and



advocates to coordinate in an ongoing manner, in order to prevent what we saw this past summer and fall in Oregon.

We understand the intention of the Team to be a place to have an ongoing conversation about safety, planning and preparedness, outside of COVID-19, and including all stakeholders involved.

Considering the last year, it seems that being prepared for the next pandemic, wildfire, earthquake, ice storm etc. is the least we can do. Having open lines of communication and a central table where agencies can seek advice on implementation and best practices will be crucial to moving Oregon's long term care system forward.

While we are not in the same crisis, we were in nearly 10 months ago, the right thing to do would be to prevent a similar crisis to the one we experienced in 2020. HB 2327 would create accountability, clarity, and the mechanisms for having a long-term care system with the highest quality outcomes.

Thank you for your time and we urge a yes vote for HB 2327.

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