



March 11, 2021

Ways and Means Sub-Committee on Human Services
900 Court St.
Salem, OR 97301

RE: Support for Oregon Guardianship Program in HB 5019

Co-Chairs Leiber, Nosse, and Members of the Ways and Means Sub Committee on Human Services,

Good afternoon and thank you for the opportunity to be here today. My name is Alicia Beymer and I am the Chief Administrative Officer for PeaceHealth's University District and Cottage Grove medical centers.

I am here today to express PeaceHealth's support of the Oregon guardianship program and how vital the guardianship program is for Oregonians struggling to navigate the healthcare system due to severe behavioral health issues. In roles I have held during my 25 years working in the healthcare field here in Oregon, I have had the opportunity to serve seniors, individuals with disabilities, and individuals experiencing behavioral health crises. During those two-plus decades, I have witnessed a chronic and very concerning shortage in guardianships.

PeaceHealth Sacred Heart Medical Centers at RiverBend and University District, Cottage Grove Community Medical Center, and Peace Harbor Medical Center are critical points of access for healthcare services in Lane County. We provide comprehensive and compassionate medical services to patients from a broad geographical area – from Portland to California. These services include trauma, neonatal intensive care, neurosurgery, heart and vascular, inpatient rehabilitation, inpatient psychiatric care and more. Behavioral health needs are a constantly and woefully underfunded need in Lane County, specifically guardianship services.

PeaceHealth relies heavily on guardians to assist patients who have significant behavioral health needs as they transition through the health system. Without guardianship services, patients often languish while being unfairly boarded in emergency rooms or on inpatient units that fall drastically short of meeting their needs while they wait for the appropriate level of care.

Our University District Behavioral Health Unit has 35 beds that are consistently at capacity. Currently, the team on the unit is caring for a civilly committed patient (Patient A) on the Oregon State Hospital wait list with a length of stay of 225 days. This patient is an ideal candidate for the Oregon Public Guardian (OPG) program. Unfortunately, they are unable to accept new clients due to a lack of funding. The extended length of stay for Patient A is resulting in delays in transfers for patients in our emergency departments waiting for acute psychiatric inpatient care. The need for this level of care is even more critical as our Behavioral Health Unit has seen a 20% increase in volume since May 2020.

Please keep Patient A in mind while I tell you about Patient B. This senior was diagnosed with Alzheimer's dementia and paranoid schizophrenia. Patient B was unhoused and lacked social

supports. This patient had been evaluated at the state hospital, sent to jail, then sent to a crisis center that they left and presented at our University District Emergency Department for a mental health evaluation. This patient was clearly unable to care for themselves.

Patient B remained in our care for a month. Six days into the patient's stay, our Care Management team began to collaborate with OPG. Once appropriate placement was arranged, the guardian was instrumental in signing the patient into the facility and providing a seamless transition of care by meeting with the patient prior to their transfer. Not only was this patient able to remain in this care community, but they have only had three emergency department visits in the last two years since the guardian stepped in. Most notably, the patient is now well cared for and safe.

Reflecting back to Patient A: Just imagine what doors could open for this individual who is going on eight months of inpatient psychiatric hospitalization without a plan. If either the Oregon State Hospital was accepting civilly committed patients or if this patient could be served by OPG who could help facilitate a transfer to a residential treatment facility. Dedicating more funding to guardianship and community resources will not only enhance the quality of life for Patient A and similar patients, but also promote timely access for individuals needing higher levels of care.

In closing, guardianship is a necessary and important process. Without a strong program, patients suffer and are denied timely and appropriate healthcare. PeaceHealth supports increases in resources contained within HB 5019 and other boosts to resources that will continue to bolster the community health system.

The guardianship program directly impacts the most vulnerable patients in Oregon, and we implore you to not only protect, but bolster this program to ensure future needs are met. We are committed to meeting with you and continuing this conversation to develop creative solutions that will drive funding to this important program.

Sincerely,

A handwritten signature in black ink, appearing to read "Alicia Beymer", with a long horizontal flourish extending to the right.

Alicia Beymer, MBA, CPHRM, CPHQ
Chief Administrative Officer
PeaceHealth Sacred Heart Medical Center, University District
PeaceHealth Cottage Grove Community Medical Center