

March 2, 2021

The Honorable Kate Lieber and Rob Nosse, Co-Chairs
Joint Committee on Way & Means, Subcommittee on Human Services
900 Court St. NE
Salem OR 97301

RE: Oregon State Hospital and civil commitment patients

Dear Co-Chairs Lieber and Nosse and members of the Joint Subcommittee,

We appreciate the opportunity to express our concerns about the Oregon State Hospital (OSH) funding within the Oregon Health Authority (OHA) Budget (HB 5024). Kaiser Permanente exists to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve. Currently, our ability to do that is extremely challenged by the inability to properly place members who meet civil commitment criteria in the OSH.

Oregonians who meet civil commitment criteria cannot access the OSH and are thus experiencing long lengths of stay in community hospitals. These extended length of stays in the community hospitals have a direct downstream impact. Acute psychiatric patients that present to our Kaiser Sunnyside and Westside Emergency Departments have extended stays as they wait for space on the Inpatient psychiatric units. Our already stretched ED teams are left to navigate the best they can as these psychiatric patients await placement for days. Our Emergency Departments are not designed for psychiatric care, nor designed for long lengths of stays. We are not able to provide the environment and care indicated and needed for these vulnerable populations. Misplacing Oregonians who meet civil commitment criteria leads to regressive outcomes, higher costs to the system per day, staff burn out, and safety risks for communities, staff, and other patients.

It is essential that those who meet civil commitment criteria are able to access the Oregon State Hospital. The impacts and effects when they cannot do so spread across every level of care in our community. We ask that you prioritize conversations currently being served and waiting placement to the Oregon State Hospital.

Thank you.

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