

Submitter: Dallas Holladay
On Behalf Of:
Committee: Senate Committee On Health Care
Measure: SB1076

I am currently an emergency medicine physician practicing at a rural, critical care hospital in Oregon. While I am sure this bill is well intentioned, it will be a disaster if passed in the current form. The Oregon healthcare system is already fracturing under the constant bed shortage, staffing crisis and ER boarding problem. It wasn't long ago pediatric hospitals were using crisis standards of care. I am specifically most concerned about the portion of the bill preventing discharge of a homeless patient at night during the winter months. ERs will not have the luxury of the same restrictions shelters use and these restrictions are in place for good reason: to protect the safety and well being of the workers and clients. I am specifically concerned about patients with substance use disorder who will present to the ER for shelter overnight. These patients are often a safety threat to staff as well as other patients. Additionally, they are often disruptive to the ER. Would you want to take your child to an ER filled with screaming, intoxicated adults? If you were unaware, Oregon ERs are suffering from unprecedented ER overcrowding and boarding. Multiple hospitals have created overflow areas in spaces like cafeterias. Several months ago, OHSU was boarding patients waiting to be admitted in THEIR CARS. We are talking about patients on IV drips, sitting in their car because there is nowhere else to put them. Our overburdened healthcare system simply doesn't have the resources, room or staff to become shelter space during the winter.

Please reconsider this deeply flawed legislation.

Sincerely,

Dallas Holladay, DO