

Submitter: R G

On Behalf Of:

Committee: Senate Committee On Health Care

Measure: SB1076

I practiced medicine in Grants Pass for several years. In that time, I found that my underhoused patients were routinely discharged to the street and, if supplies were available, received a donated sleeping bag and a tent from the hospital. We had one church-affiliated "shelter" in town that either could not accept patients with most health conditions or was refused by many patients because staying there required mandatory participation religious events. I had one patient who had such strong negative opinions about that "shelter" as an option that his discharge plan was documented as "to the woods so I can die by the river in peace". He slept in his car for two weeks for his first two post operative appointments, then was never seen or heard from again. I had numerous frostbite patients who were discharged back to their 5th wheel in the woods during the winter, regardless of the time of day of discharge, without available power, wood, or propane for heat.

The proposed legislation does nothing to fix the abysmal sociopolitical situation of rural Oregon counties. It does nothing to convince the local townspeople that having a truly unbiased and non-denominational shelter is a valuable community resource worth funding. It does nothing to expand public transit options to enable patients a safe return to their place of residence and followup care. It does nothing to augment existing behavioral health or social service resources. Please try again with this legislation. It was heartbreaking to practice medicine in Oregon and I am grateful I no longer live nor work there.