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Date: March 20, 2025

To: The Honorable Chair Anessa Hartman  
The Honorable Vice-Chair Hoa Nguyen  
The Honorable Vice-Chair Anna Scharf  
House Committee on Early Childhood and Human Services

From: Mandi Hudson, DO  
Psychiatrist, Trillium Family Services  
Assistant Professor of Psychiatry, Western University of Health Sciences, College  
of Osteopathic Medicine of the Pacific - Northwest

RE: HB 3835

Chair Hartman, Vice-Chairs Nguyen and Scharf, and members of the committee:

My name is Dr. Mandi Hudson, and I am a psychiatrist who works with our state's most psychiatric ill children and adolescents. I am writing in support of HB 3835. This bill addresses the critical issues arising from SB 710 and SB 1515. As a psychiatrist working in residential mental healthcare for nearly 12 years, I've personally observed the unintended consequences stemming from current laws that label necessary interventions by staff as potential abuse.

Since the passage of SB 710 and SB 1515, Oregon has experienced a drastic reduction in psychiatric beds available for youth. Psychiatric facilities that remain operational have become increasingly hesitant to admit youth who exhibit aggressive or unsafe behaviors due to fears of regulatory consequences. Consequently, the children with the highest risks and greatest needs now find fewer resources available. This has directly contributed to more than double the number of youths entering emergency departments and being held there for intolerable amounts of time (weeks sometimes, in rooms without windows). This overwhelms our state's capacity to safely and effectively serve children in crisis in our emergency departments.

Current statutes have inadvertently created an environment where staff who must physically intervene to protect youth, peers, or themselves are regularly reported for potential abuse. Staff face investigations and often career-ending consequences—even when the intervention is both necessary and justified. The stress of these investigations, along with the associated administrative burden, staffing shortages, and increased turnover, has driven many dedicated professionals away from careers serving youth, further exacerbating staffing shortages and cost burdens for child-caring facilities across Oregon.

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The consequences are not only operational but deeply personal and harmful: dedicated professionals lose their livelihoods, and vulnerable youth lose critical support. Facilities are now hesitant or unwilling to serve youth with aggressive behaviors due to liability fears, thus depriving our most at-risk children of desperately needed services. I've witnessed firsthand how these policies have directly reduced available psychiatric beds, decreased care accessibility, and placed additional, unnecessary burdens on our already-strained healthcare system.

House Bill 3835 will correct these issues by clarifying what constitutes appropriate intervention, reducing unintended penalties against staff who act responsibly, and reinstating a balanced approach that allows child-caring agencies, including psychiatric facilities, to safely care for children while ensuring accountability and best practices.

For the safety and wellbeing of Oregon's youth and the dedicated professionals who support them, I urge you to support House Bill 3835. Thank you for the opportunity to provide our perspective on this bill.

Sincerely,

A handwritten signature in black ink, appearing to read 'M Hudson', with a long horizontal line extending to the right.

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