

Requested by Senator HAYDEN

**PROPOSED MINORITY REPORT AMENDMENTS TO
SENATE BILL 1570**

1 In line 2 of the printed bill, after “facilities” insert “; and declaring an
2 emergency”.

3 Delete lines 4 through 8 and insert:

4 **“SECTION 1. (1) The Task Force on Health Care and Law Enforce-**
5 **ment Coordination is established.**

6 **“(2) The task force consists of 15 members appointed as follows:**

7 **“(a) The President of the Senate shall appoint two nonvoting**
8 **members from among members of the Senate, each member being**
9 **from a different political party.**

10 **“(b) The Speaker of the House of Representatives shall appoint two**
11 **nonvoting members from among members of the House of Represen-**
12 **tatives, each member being from a different political party.**

13 **“(c) The Governor shall appoint 11 members as follows:**

14 **“(A) Two members who are county sheriffs, one who is from a rural**
15 **area and one who is from a county with a major urban city.**

16 **“(B) Two members who are chiefs of police, or designees of the**
17 **chiefs of police.**

18 **“(C) One member representing the Oregon Nurses Association who**
19 **works as a registered nurse in a hospital.**

20 **“(D) One member representing the Oregon Medical Association who**
21 **is a practicing physician.**

1 **“(E) One member representing ambulance or emergency services.**

2 **“(F) One member representing a hospital.**

3 **“(G) One member representing federally qualified health centers.**

4 **“(H) One member representing the Oregon Health Authority.**

5 **“(I) One member representing the public who has a background or**
6 **experience in safety or health care.**

7 **“(3) The task force shall study how often and what happens when**
8 **a law enforcement authority arrives or shows at a hospital or federally**
9 **qualified health center in this state. The study must include a review**
10 **of the following:**

11 **“(a) The frequency with which local, state or federal law enforce-**
12 **ment authorities show at a hospital or federally qualified health cen-**
13 **ter;**

14 **“(b) The different types of law enforcement authorities, including**
15 **federal immigration authorities, who show at a hospital or federally**
16 **qualified health center;**

17 **“(c) Differences, if any, between how local, state and federal law**
18 **enforcement authorities and the different types of law enforcement**
19 **authorities conduct themselves and interact with staff and patients**
20 **at a hospital or federally qualified health center when showing at the**
21 **hospital or federally qualified health center;**

22 **“(d) How hospitals and federally qualified health centers manage:**

23 **“(A) Public and nonpublic areas of the hospital or federally qualified**
24 **health center;**

25 **“(B) The disclosure and transmission of individually identifiable**
26 **health information, as defined in ORS 192.556, and information con-**
27 **cerning a person’s citizenship or immigration status, as defined in**
28 **ORS 180.805; and**

29 **“(C) The arrival or showing at the hospital or federally qualified**
30 **health center by a law enforcement authority;**

1 “(e) The frequency with which nurses or workers of a hospital or
2 federally qualified health center share information with a patient or
3 patient family member regarding legal rights or available legal ser-
4 vices, and how the hospital or federally qualified health center re-
5 sponds or otherwise manages situations where a nurse or worker
6 shares such information;

7 “(f) Impacts, if any, on patient treatment, hospital work, public
8 safety and trust in hospitals, federally qualified health centers and the
9 health care system resulting from law enforcement authorities show-
10 ing at a hospital or federally qualified health center; and

11 “(g) Recommendations to improve how law enforcement authorities
12 and hospitals and federally qualified health centers may interact and
13 work together and when not to work together.

14 “(4) In conducting the study, the task force shall:

15 “(a) Seek input from every hospital and federally qualified health
16 center in this state and ask for any records the hospital or federally
17 qualified health center may have on incidents where a law enforce-
18 ment authority arrived or showed at the hospital or federally qualified
19 health center;

20 “(b) Seek input from all sheriffs and police departments about their
21 experiences at hospitals and federally qualified health centers, and
22 whether any federal law enforcement authorities were involved with
23 those experiences;

24 “(c) Seek input from doctors, nurses and ambulance and emergency
25 services workers using:

26 “(A) Surveys;

27 “(B) Focus groups; and

28 “(C) Public meetings to be held in at least three different ge-
29 ographically distinct regions across this state;

30 “(d) Using publicly available information, conduct a survey of fed-

1 eral reports and data on immigration law enforcement actions that
2 occur in a health care setting;

3 “(e) Review policies of hospitals and federally qualified health cen-
4 ters and any prior incidents between law enforcement authorities and
5 hospitals or federally qualified health centers in this state; and

6 “(f) Work with the Oregon Health Authority and the Department
7 of Justice to gather any other additional and relevant data.

8 “(5) A majority of the voting members of the task force constitutes
9 a quorum for the transaction of business.

10 “(6) Official action by the task force requires the approval of a
11 majority of the voting members of the task force.

12 “(7) The task force shall elect one of its members to serve as
13 chairperson.

14 “(8) If there is a vacancy for any cause, the appointing authority
15 shall make an appointment to become immediately effective.

16 “(9) The task force shall meet at times and places specified by the
17 call of the chairperson or of a majority of the voting members of the
18 task force.

19 “(10) The task force may adopt rules necessary for the operation
20 of the task force.

21 “(11) The task force shall submit a report in the manner provided
22 by ORS 192.245, and may include recommendations for legislation, to
23 the interim committees or committees of the Legislative Assembly
24 related to health care no later than November 15, 2027. The report
25 must address the subjects described in subsection (3) of this section
26 and include a breakdown of the data by region and type of interaction.

27 “(12) The Oregon Health Authority shall provide staff support to the
28 task force.

29 “(13) Members of the Legislative Assembly appointed to the task
30 force are nonvoting members of the task force and may act in an ad-

visory capacity only.

“(14) Members of the task force who are not members of the Legislative Assembly serve as volunteers on the task force and, unless they are qualified members, as defined in ORS 292.495, are not entitled to compensation or reimbursement for expenses.

“(15) All agencies of state government, as defined in ORS 174.111, are directed to assist the task force in the performance of the duties of the task force and, to the extent permitted by laws relating to confidentiality, to furnish information and advice the members of the task force consider necessary to perform their duties.

“SECTION 2. Section 1 of this 2026 Act is repealed on December 31, 2027.

“SECTION 3. This 2026 Act being necessary for the immediate preservation of the public peace, health and safety, an emergency is declared to exist, and this 2026 Act takes effect on its passage.”.
