

**Oregon House Committee on
Business and Labor
Testimony of Deborah Whiting Jaques
House Bill 2950
March 13, 2013**

Chairman Doherty and Members of the Committee:

I am Deborah Whiting Jaques, the Chief Executive Officer of the Oregon Hospice Association. I appreciate this opportunity to submit testimony about HB 2950 which we wholeheartedly support. The Oregon Hospice Association believes the bill will improve how Oregonians cope with the death of a family member and provide the time for them to do so. We believe HB 2950 provides compassionate assistance to grieving Oregonians while not increasing the financial burden on Oregon's employers.

The Oregon Hospice Association is a public benefit, 501(c)(3) organization whose primary function is to ensure that Oregonians have access to and receive high quality hospice and palliative care. We exist to serve the public. For more than 30 years, the Oregon Hospice Association has assisted Oregonians as they grapple with serious illness and the end of their - or their loved ones' - lives.

The Oregon Hospice Association provides education, information and advocacy to address the very real issues of real people who seek help about end of life care. We serve Oregonians on a person-by-person level. Rarely a day passes without a call from a daughter exhausted from caring for a dying parent, or a husband unsure of where to turn for advice about care options or finances, or a family asking for advice about managing their loved one's pain. Many of the calls we receive are from Oregonians who need help with bereavement.

Bereavement is an important component of hospice and palliative care. All Oregon's hospices – and indeed hospices across the nation – are required to make bereavement services available to families up to a year following the death of a family member. Hospices are also required to provide bereavement care to the staffs of nursing facilities that have cared for hospice patients. The Centers for Medicare and Medicaid and Oregon's own statutes and rules acknowledge that bereavement care is an essential component of end-of-life care.

Oregon's hospice and palliative care agencies are experts at providing bereavement care to surviving family members. We are keenly aware that death is one of the most stressful events we experience. We know that unresolved grief can impair how an individual functions in their routine life – including their work life. But, grieving requires time.

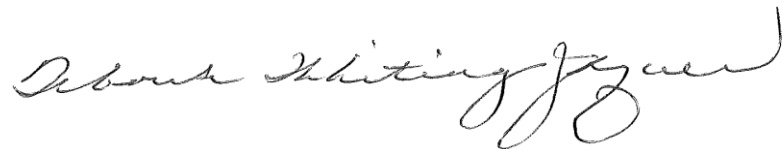
Our existing 3 day bereavement leave policy is inadequate to address Oregonians' need to heal following the death of a loved one. Three days of leave does not even provide time for final arrangements and funeral or memorial services. The compassionate and professional response is to allow grieving family members up to 2 weeks of bereavement leave within the total 12 weeks of leave allowed under existing family leave.

HB 2950 does not add any time to the already existing family leave. The bill simply provides that up to 2 weeks of family leave can be provided for eligible working and grieving Oregonians.

The Oregon Hospice Association supports HB 2950. The bill acknowledges Oregonians' need for time to grieve. Oregon is seen as a leader in the nation for end-of-life care. Passage of HB 2950 is consistent with our leadership role.

I welcome the opportunity to further discuss the impacts of SB 161 to end of life care in our state.

Respectfully,

A handwritten signature in cursive script, reading "Deborah Whiting Jaques". The signature is written in black ink and is positioned above the typed name and title.

Deborah Whiting Jaques
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