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Sent electronically to: jwmhs.exhibits@oregonlegislature.gov

Oregon State Legislature Joint Committee on Ways and Means Subcommittee on Human Services 900 Court St. NE Salem Oregon 97301

Re: Senate Bill 944

Co-Chair Senator Steiner Hayward, Co-Chair Representative Rayfield and members of the Joint Committee on Ways and Means Subcommittee on Human Services:

St. Charles Health System is in agreement with the concept of streamlining and improving statewide coordination of access for children/youth who need secure mental health residential and subacute beds. Currently there is no streamlined process which results in youth boarding in our local emergency departments for hours and days on end. A 24-hour call center, as outlined in SB944, dedicated to tracking and providing information about available placement settings for children and adolescent needing high acuity behavioral health services is desperately needed in Oregon.

St. Charles Health System finds itself boarding youth in our Emergency Departments on a regular basis and has had several children languish in emergency rooms for up to 10 days while hospital staff desperately calls every service provider in the state to attempt to find appropriate beds. Finding and securing appropriate placement takes hours of time just in the context of attempting to locate a facility that has an available bed. Currently, hospital staff are forced to call each facility on a daily basis to determine if a bed is available while the youth waits in the Emergency Room.

The amount of time attempting to find available and appropriate resources could be decreased dramatically by a call center dedicated to tracking and providing information about available placement settings for the youth. This would allow the staff to then focus all of their attention away from calling numerous different facilities and instead applying for the available beds. How the system is currently set up only allows for "Luck of the Draw" in finding a facility with the hopes that you call the facilities who have a bed first instead wasting valuable time calling other facilities that do not have beds.

St. Charles Health System boarded over 80 youth for more than 8 hours in their emergency departments in 2016. 39 of those youth were in the Emergency department for more than 24 hours, with 20 of those youth boarding for longer than 48 hours. Recently we had a youth in our care for 24 days while attempting to find placement. There were more than nine organizations involved in attempting to find an appropriate placement and over 24 individuals from these organizations involved with attempting to find and organize care, with no policy identified leader. Conference calls occurred between all of these individuals/organizations on a daily basis while the youth was waiting for appropriate care. As a result of the lack of system monitoring and organization with all the information located in one place we see days of patients waiting in the ED which causes an absorbent cost fiscally and for the family and child, emotionally.

St. Charles Health System supports SB944 as we believe that a call center will ultimately allow for a more streamlined approach to accessing beds which will likely improve access to appropriate care, decrease overall costs and improve the overall treatment for our youth.

Respectfully,

Molly Wells Darling, LCSW Director, Inpatient Behavioral Health Services St. Charles Health System