

To:Members of the Senate Committee on WorkforceFrom:Undersheriff Troy Clausen, Marion County Sheriff's Office
Oregon State Sheriffs' Association (OSSA)
Chief Jim Ferraris, Woodburn Police Department
Oregon Association Chiefs of Police (OACP)

Date: March 19, 2019

Re: Opposition to SB 507 – Stress Claim Occupational Disease Presumption

Chair Taylor and Members of the Committee,

On behalf of the Oregon Association Chiefs of Police and the Oregon State Sheriffs Association, please accept this testimony in opposition to legislation that proposes to create a Stress Claims/Post-Traumatic Stress Disorder (PTSD) occupational disease presumption

As a profession, we care deeply about the wellness of our officers. They perform a noble and critical mission on behalf of our citizens and they deserve our best efforts to keep them safe and well throughout their work career.

This is a priority area of focus for law enforcement leadership and we are actively working to insure that our agency policies and programs represent best practice approaches that keep officers well from their first day of work until they complete their public safety career and move on to their next adventure in life. Here is an overview of our efforts:

Sustained Leadership Training Focus on Wellness:

2019 Executive Leadership Training Seminars (January 16-18, 2019)

- "Building and Sustaining an Officer Wellness Program... Lessons Learned from San Diego Police Department" - Assistant Chief Sandra Albrektsen, San Diego PD & Lieutenant Carmelin Rivera, San Diego PD
- Officer Wellness Statewide Task Force Survey Results Briefing Undersheriff Troy Clausen (Marion County) and Captain Erica Hurley (Portland Police Bureau)

2018 Fall Leadership Conference (September 26 -28, 2018)

- Increasing Resilience in Police and Emergency Personnel Stephanie Conn (Author and Psychologist)
- Officer Wellness Statewide Task Force Presentation Deputy Chief Bob Day (PPB) and

Undersheriff Troy Clausen (Marion County)

- Milagro; Adding a Comfort K-9 to Your Officer Wellness Program Chief Jeff Groth and Captain Ty Hanlon, Sherwood PD
- Bend PD Officer Wellness Program Presentation Chief Cory Darling, Sunriver PD and Lt. Brian Beekman, Bend PD

2018 Executive Leadership Training Seminars (January 16-18, 2018):

- "Leading to reduce Organizational Stress in Law Enforcement" –Chief Kent Williams (Breachpoint Consulting)
- "Destination Zero: Collaborating to Advance Officer Safety and Wellness" Larry Cecchettini (National Law Enforcement Officers Memorial Fund's Destination Zero Program)
- "The Oregon Behavioral Crisis Response Initiative" Chief Jim Ferraris (Woodburn PD)/Undersheriff Troy Clausen (Marion County Sheriff's Office)
- "Not Just Surviving; Leading through Loss, Conflict and Crisis" Captain Bob Day (Portland Police Bureau)

2017 Fall Leadership Conference (September 27th – 28th, 2017):

- "Emotional Survival for Law Enforcement" Chief Robert White (IACP Leadership Development)
- "Leading on Empty Lessons Learned from Rock Bottom" Dr. Wayne Cordeiro
- "Officer-Involved Domestic Violence Policy Framework Training" Sheriff Craig Roberts (Clackamas County Sheriff's Office)

Active participation in the Sen. Frederick workgroup on Officer Wellness:

Representatives of the Oregon Association Chiefs of Police and Oregon State Sheriffs' Association participated in this workgroup following the 2018 Legislative Session. As a part of our participation, we conducted a comprehensive survey to determine current wellness policies and programs throughout the State of Oregon. We secured a 90+% response rate that included responses from municipal, tribal and university police as well as Sheriff Offices, the Oregon State Police and the Oregon Department of Corrections The product of this workgroup has resulted in the introduction of two legislative measures that address pre-employment psychological exams and agency wellness policies.

Statewide Officer Wellness Task Force

The OACP, OSSA and Department of Public Safety Standards and Training also convened a Statewide Officer Wellness Task Force in early 2018 that is hard at work to identify gaps and needs related to officer wellness programs, to create resources to assist agencies to improve their wellness efforts and to create an Officer Wellness Policy Framework to insure that agencies have access to best practice policies and programs that can be adapted to work in agencies of various sizes and geographic locations. When it comes to Oregon law enforcement agencies, "one size definitely doesn't fit all agencies". For instance, a large agency can implement programs that a small

department is unable to achieve. Likewise, a small agency can implement programs that a large agency is unable to achieve. Best practice by definition must be adaptable to be effective. In Oregon, we have 65 police departments with 10 or fewer sworn officers where the police leader pulls shifts and responds to calls for service. The Statewide Officer Wellness Task Force is working to provide effective tools (including policy recommendations, training, and resources) to all Oregon police agencies with a focus that spans from pre-employment, throughout an officers career to retirement and even post retirement.

A significant topic for our task force and one related specifically to HB 2418 is the use of Employee Assistance Programs (EAP) and professional visits to qualified mental health professionals with a public safety background as part of an early intervention system. Anecdotally, virtually all public safety agencies represented on the task force have issues with their local mental health providers contracted to perform public safety Employee Assistance Programs. The task force has noted that these mental health professionals should adhere to and be trained on the guidelines set forth by the American Psychological Association to provide mental health services, specific to public safety. These early intervention strategies are crucial to helping public safety personnel who experience work related trauma.

Both OACP and OSSA understand that some members of our profession will be impacted by PTSD. We also realize that there are many instances where our professionals have been impacted by work related stress and/or trauma that doesn't rise to the level of PTSD and we have the ability to utilize the many public safety specific mental health professionals within the State to help us determine the best course of action and treatment options or plans for our personnel. This includes on-going, HIPPA protected, mental health counseling sessions and if needed, Fitness for Duty examinations. None of these processes preclude an employee from filing a Workers Compensation Claim involving a diagnosis for Post-Traumatic Stress Disorder.

Here are our concerns with HB 2418:

The approach recommended in HB 2418 represents a profound shift in workers compensation policy around Stress Claims/Post-Traumatic Stress Disorder (PTSD) that would cover a significant number of public safety employees. In light of this, we believe it is vitally important to fully evaluate the potential impacts the shift in presumption would have on public safety personnel, employers and the workers compensation system as a whole. Before legislation of this nature moves forward, we believe a robust workgroup process should be conducted with stakeholders and parties with workers compensation and public safety mental health expertise.

In an environment of limited public safety resources, efforts should be focused on mental healthcare programs for first responders that are accessible early, before an injury becomes acute, accessible often, throughout a first responder's career, and accessible privately, so the first responder feels free to utilize care. Solutions outside of the Workers Compensation System are critically important in order to ensure HIPPA protection. In particular, strengthening City County EAP programs so that they utilize psychologists/treatment providers who specialize in first responders would be an

important and effective approach. In addition, investments in more robust benefits programs that apply resources "upstream" to address trauma before a PTSD determination is made make good sense. Ultimately, proper identification, referral and treatment by a professional who specializes in First Responders yields the best result as the vast majority recover and go on to have a healthy career.

Thank you.