

Statement of Steve Paysinger in Support SB 700

Dear Members of the Senate Committee on Health Care:

I have been working in the field of brain injury rehabilitation in Oregon for 36 years as an Occupational Therapist, advocate and administrator. Over those years I have evaluated and treated approximately 2,000 Oregonians who have experienced brain injury at all levels of severity. Each person I've treated is uniquely different in their strengths and challenges and yet one particular commonality has been a constant, which is their need for support. The "support" equation has many specific variables, such as, coordination of multiple types of care, living resources, social support and employment to name a few. If you would, take a second and imagine your current ability to structure your daily life has been removed and today is your first day as an undergraduate freshman college student at a major university. There is no guide and no one to call who understands the complexity of higher education. Survival and success are up to you. This scenario is a parallel to the reality of those who have experienced brain injury where there are multiple unknown entities and no guide. What would you need?

Brain injury rehabilitation is life-long. There is no cure. It is complicated and the course of recovery is never in a straight line. Those who do well are those who have a support system. In my experience, the most reliable prognostic indicator for how well a person will recover over their life span is their level of support. If there was the illusive "magic pill" for brain injury recovery it would be support. In my experience very few patients, even those with resourceful family members are able to assemble the strategic and orderly system of support needed to facilitate the best outcomes over the lifespan. The burden of care coordination ultimately falls to the person who has a brain injury and/or the family...or as I often experience, the last person who cares, and has enough duct-tape to hold the often inadequate plan together. Duct-tape is not the answer.

I strongly believe a role where specific and designated care coordination is the aim will improve the quality of life of Oregonian's living with brain injury. As well, I see this role as a means to straighten the course of recovery which will improve efficiency. With improved efficiency there is often a reduction in cost which I believe has been well documented in other testimony related to this bill. Ultimately, I see this role as a means to help architect and construct the supports needed for success, both for the individuals who experience brain injury, and the well-intended multiple provider agencies across the state who rarely work together in unity because there is no one to unite them. Senate Bill 700 is a means to unite.

Respectfully,

Steve Paysinger, OTR/L
452 Monte Vista Avenue
Silverton, OR 97381
503-931-2815
Neuromuscular Therapy Supervisor/Salem Health
Oregon State Rehabilitation Council Chair, 2019-Present
Integrated Supports for Living (IS Living), Board President 2012-Present
Brain Injury Alliance of Oregon, Board Chair 1994-1998