

Oregon Senate Committee on Judiciary and Ballot Measure 110 Implementation  
Senate Bill 1568  
Regarding Compassionate Release

Chair Prozanski, Vice-Chair Thatcher, Committee Members,

My name is Ann Turner. I am a retired physician and former medical director at Virginia Garcia Memorial Health Center, which serves families with many barriers to care and I am a member of Oregon Physicians for Social Responsibility (OPSR).

I strongly urge you to vote **“YES”** on **SB 1568** to assure compassionate medical release of severely ill and disabled incarcerated adults.

The vulnerability of those in prison came to my attention at the outset of the pandemic when it became clear that the recommended public health interventions would be difficult if not impossible to carry out in Oregon’s crowded prisons. The congregate setting of a prison is similar to a long term care facility in that those living in these settings have little to no control over whether they or the staff wear masks, practice good hygiene or follow the guidelines for social distancing. According to the Department of Corrections website, 45 people in Oregon’s prisons have died of COVID-19 as well as 3 of the prison staff and more than 5,000 have been diagnosed with COVID.

A significant percentage of prisoners have chronic illnesses and that rate increases as those in prison age. In fact, Oregon has one of the oldest prison populations in the country. If we do not address this public health challenge now, we can only expect that we will be in a public health crisis of our own making. The cost of caring for these individuals is high and their recidivism rate is very low. Prisons are generally ill-equipped to meet the needs of elderly and chronically-ill patients who may require intensive services for these conditions.

As a State, we need a law that makes it **possible** for people in prison who have serious medical conditions and disabilities to be released when they are not a safety risk to the community. Further, it is imperative that there is a process for addressing the next public health emergency or natural disaster. The current statute has been ineffective in achieving that goal. SB 1568 creates a statute and process that will be effective in the humane treatment of incarcerated adults (AIC’s) with serious medical conditions and/or disabilities.

When the purposes of imprisonment—punishment and rehabilitation—no longer make sense for incarcerated adults (AIC’s) because of health conditions, we must provide a mechanism for release that is based on an evaluation done by qualified medical personnel. SB 1568 does this by creating an independent Medical Release Advisory Committee (MRAC), made up of 7-13 licensed medical professionals within the Board of Parole. Those eligible for release are those with terminal illnesses with less than 12 months to live or severe disabilities such that they are unable to complete their activities of daily living independently. In the case of a disaster or public health emergency, the MRAC would have the authority to review applications of those at greatest risk of harm from the emergency.

As a physician, I must emphasize how important it is that the evaluation of requests for early compassionate release be done by licensed professionals who have the medical expertise to make an appropriate determination, considering not only the person's primary illness or condition but his/her co-morbidities and functional status. Many AIC's are medically fragile and unable to advocate for themselves. For the future, especially in the situation of a public health or other emergency, medical expertise is essential in making an assessment that will protect incarcerated persons from serious illness and/or death.

This bill will not put our communities at risk. If the medical recommendation is to release the AIC, it directs the Board of Parole to accept the recommendation unless the person poses specific danger to another person or to the public that outweighs compassionate reasons for release. A health navigator will assure that AIC's who are released have a care plan and the support they will need in the community.

Importantly, this bill establishes a process for applying for early compassionate release, a timeline for the MRAC to make a decision, and requires that data is collected so that the process can be evaluated.

The bill supports the humane, just and compassionate treatment of those in Oregon prisons suffering from severe medical illnesses and disabilities. **Please vote "YES" on SB 1568.**

Thank you.

Ann Turner, MD