

Testimony in support of SB 520

I am active with two organizations that support smart criminal justice reform, and SB 520 is definitely an example of that.

This bill greatly improves Oregon's system of compassionate medical release. I believe that people who are terminally ill, have specific dangerous medical conditions, or are so incapacitated physically or mentally that they are unable to do normal daily activities without round-the-clock care do not belong in prison. If there is no longer any relevance to their incarceration--either for rehabilitation or accountability for their crime--incarceration becomes both meaningless and unnecessarily cruel, and it is also an inappropriate burden on Department of Corrections personnel. Compassionate early medical release should be possible and timely, if a qualified Medical Release Advisory Committee approves and recommends it. Every prisoner should be eligible for application for this release, plus those that DOC recommends. Compassionate medical release should be possible for those who meet the medical criteria standards, and if there is a suitable place outside of prison that they can be properly cared for. The only exception should be if a person, in spite of their condition, would actually pose a danger to another person or to the public if released.

It is very important that this improved compassionate medical release process will be both publicized and accessible. The requirement that the Advisory Committee act quickly is very relevant, as some who apply will have a medical prognosis of 12 months or less to live. Timing is also important for those who are no longer able to do routine activities of living, such as eating, dressing, toileting, bathing, or mobility. There are also emergency situations that need immediate action for the safety of the prisoner or of a facility.

This is a carefully thought-out bill, that benefits AIC in unfortunate end-of-life and medical circumstances and also benefits the Department of Corrections, and that puts timely decision-making in the hands of a medically qualified committee. It also gives consideration to crime victims and requires data tracking on the process. I hope all the members of the Senate Committee on Health Care will approve it.