



To: House Committee on Emergency Management, General Government, and Veterans

From: Michael Saul

Date: February 6, 2024

RE: HB 4045 Public Safety Workforce Stabilization Act of 2024

Dear Chair Grayber, Vice Chair Lewis, Vice Chair Tran, and members of the committee,

My name is Michael Saul, and I am a Physical Electronic Security Technician at the Oregon State Hospital (OSH) in Salem. I'm sharing my testimony today with 3 years of experience working in the demanding and often unpredictable environment of patient housing units. While I am just one example, my story reflects the daily realities and safety concerns faced by many facilities workers at OSH.

My work requires me to access areas that patients are actively occupying, such as bedrooms and the spaces above them in suspended ceilings. While collaboration with patients and staff is crucial, it also creates inherent vulnerabilities. We rely on their cooperation to grant access, and their close proximity while we use tools adds risk. Even without the direct use of tools as weapons, patients experiencing emotional distress can pose a significant threat to our safety. This risk isn't hypothetical; just recently, a fellow facilities worker, a painter, was physically assaulted by a patient.

My own safety hasn't been spared. In my previous role as a contractor working within OSH, I encountered a situation where a patient inappropriately touched me while I was installing data cables in the hallway of a patient housing unit. This experience, while not directly related to my current duties, underscores the importance of safety measures for all facilities workers who interact with patients in various capacities. Additionally, as a Physical Electronic Security Technician, I've had another incident where a patient jumped up and slapped me while I was working on a ladder in a patient-occupied space. These incidents highlight the constant vigilance required in our roles. Even working with another facility worker doesn't guarantee complete safety, as evidenced by the painter's assault.

That's why I strongly support HB 4045. Recognizing facilities workers as direct care providers would be a crucial step towards enhancing our safety and well-being. This wouldn't just be a title change; it would bring several benefits:

- Improved safety measures: Increased resources could be allocated to implement protocols and equipment that better protect us while we work.
- Enhanced training: Comprehensive training in de-escalation, crisis intervention, and self-defense could equip us to handle challenging situations more effectively.
- Reduced turnover: Recognizing the value and risk inherent in our work could lead to improved compensation and benefits, encouraging experienced personnel to stay longer, fostering stability and expertise within the department.

I understand there may be concerns about the cost or scope of HB 4045. However, I believe the investment in the safety and well-being of facilities workers, who directly and indirectly impact patient care, is vital. It's an investment in a safer, more stable, and ultimately more effective hospital environment for everyone.

By recognizing facilities workers as direct care providers, you acknowledge the risks we face and the essential role we play in the well-being of OSH patients and staff. It's not just about fixing equipment; it's about creating a safe and secure environment where healing can truly take place.

I urge you to fully support HB 4045, with the crucial expansion to include all facilities workers within the definition of "direct care providers." This bill is an investment in the future of OSH, ensuring a safer, healthier, and more positive environment for patients, staff, and the people who keep the hospital running smoothly.

Thank you for your time and consideration.

Sincerely, Michael Saul, Physical Electronic Security Technician