

2.5.24 – Senate Health Care Committee – Public Hearing on SB 1560

Chair Prozanski, Vice-Chair Thatcher, and Members of the Committee,
For the record, my name is Kyle Hedquist. I am a Policy Associate with the Oregon Justice Resource Center (OJRC). I am here in support of SB 1560.

In addition to my role at the Oregon Justice Resource Center, I am also here as someone who has experience of working on hospice within the Oregon Department of Corrections. I was part of the first group of hospice volunteers at the Oregon State Penitentiary when the program was established there in 1999. I would estimate that over the years I spent thousands of hours sitting with people and helping take care of them. Hospice volunteer is very much a hands-on position: cleaning people up, helping them get showered, clipping their nails, the whole nine yards. But there is also an emotional side to the support: making calls to update their families, advocating for the patient, and sometimes being with them as they take their final breath. I know any of you who has been at the bedside of someone while they are dying will understand how deeply impactful that experience is.

One of the harshest realities of dying in prison is that even when someone is in hospice and it is apparent that they do not have much longer, getting their family into the prison to say goodbye is exceedingly difficult. I cannot tell you how many hours I have spent trying to help facilitate bringing in the family to see their loved one before they pass and how many hurdles there are to getting that done. The saddest part is that children are rarely allowed in, so I have seen people die without getting to say goodbye in person to their kids.

What I have learned from working in a prison hospice is that we are unnecessarily incarcerating people who do not have the capacity to pose a threat to anyone. I

have never seen any of the extremely sick people I helped take care of make a miraculous recovery to full health. There is no good reason we should have people die in prison who could be at home with their loved ones. Our current laws make it almost impossible for people to receive a compassionate medical release. We are asking them to follow a needlessly complicated process at a time when they are struggling to complete the most basic tasks of daily living. In fact, from 2013 to 2021, 166 adults in custody with severe medical conditions applied for compassionate medical release. Of those applicants, only 12 (7%) were able to complete the process and were granted release. In that same period, 11 applicants passed away while waiting for an outcome.

What we need instead – and what the SB 1560 task force will help study – is a more straightforward and timely process that allows medical professionals to make medical release recommendations. SB 1560 will enable the legislature to research and analyze the matter of adults in custody who are aging, dying, and medically infirmed in prison, as well as the pitfalls of the current compassionate medical release process. This bill will prepare the state to create better policies and procedures that are compassionate in how it treats our terminally ill AIC (Adults in Custody) and help develop appropriate responses to the problem of continuing to incarcerate people we do not need to be incarcerated.

I urge you to support this bill.

Thank you for your time.