

Submitter: Aubrey Kelly  
On Behalf Of:  
Committee: House Committee On Early Childhood and Human Services  
Measure, Appointment or Topic: HB3835

Chair Hartman, Vice-Chair Scharf, members of the committee, my name is Aubrey Kelly. I am from the Oregon Department of Human Services and am here in support of HB3835. I have worked for ODHS for 17 years and have been a Child-Caring Agency Licensing Coordinator for the past 12 years. My team is located within the Office of Training, Investigations and Safety.

In June 2019, I was assigned as the Licensing Coordinator who handled the out of state programs where ODHS had children placed. I visited many of the out of state programs you have heard about. From June 2020 until July 2024- no children in the custody of Child Welfare had been placed in a CCA out of state.

In July 2024, I was contacted by the ODHS Child Welfare Treatment Services Unit and informed there was currently a child who had been admitted to an Oregon children's hospital and the hospital's recommendation was for the child to receive lifesaving care in a program in Arizona. The Arizona program has a sister program in Oregon, which is currently licensed as a CCA, however this child's needs were more than the Oregon CCA could treat. There were no other Oregon CCA's who offered the level of medical care the child needed. A large team consisting of ODHS staff, OHA staff and the children's hospital staff met, and the hospital advised there were two options for this child, either the child receives treatment and finds recovery, or the child would be facing morbidity or mortality. The second option was unacceptable to everyone.

I was immediately tasked with conducting extensive research on the program in Arizona, including a review of licensing reports and past civil penalties. I then flew to Arizona to conduct a pre-placement visit to the program. I toured the program, met with the Executive Director and other staff of the program to learn more about their policies and procedures. The program was unlike anything in Oregon as they provided onsite medical care that is not available in Oregon. Let me be clear, this was not a hospital. It was an LLC licensed as a Behavioral Health Inpatient Facility in Arizona.

After my review and in-person visit of the program, ODHS made the lifesaving decision to send the child to the program in Arizona. The child was admitted to the program and weekly visits were made by either the child's caseworker or me. My focus during my visits was to ensure the safety and wellbeing of the child. During my visits to the program, I watched the child improve, the child went from dying to

thriving. I remember during one visit, the child said to me, "Please tell everyone in Oregon I'm engaging in treatment and easily redirectable." During one of my last visits, the child was excited to tell me they had been elected as "Mayor" of the milieu based on engaging in treatment and supporting others in the program. After 11.5 weeks at the program the child was successfully discharged and returned to Oregon.

This program has accepted and continues to accept Medicaid and private insurance referrals for Oregon children. I worked with the program for months to become licensed as an Oregon CCA as required by current statutes to serve children in the custody of Child Welfare. While interested and committed, they were unable to become an Oregon provider due to being an LLC.

I have never been more proud to work for ODHS as I was during this time. ODHS made the decision that was in the best interest of the child. Lessons were learned from the past, once we learned what we needed to do better, we did better. The decision to break the law and send this child to a program out of state, saved the child's life. With the passage of this bill, we will be taking a critical step to ensure all Oregon children have access to life saving care they so desperately need and deserve.

Thank you so much for your time today.

Aubrey Kelly