

OFFICE OF THE CORRECTIONS OMBUDS

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Written Testimony in Support of Senate Bill 5101

January 19, 2023

Madame Chair, Ranking Member, and Members of the Committee:

It is my distinct pleasure to provide you with my written testimony supporting SB 5101, relating to extraordinary medical placement for incarcerated individuals at the Department of Corrections. I serve as the Office of the Corrections Ombuds Director. The purpose of the Office of the Corrections Ombuds (OCO) is to:

- Provide information
- Promote public awareness & understanding
- Ensure compliance with relevant statutes, rules, & policies
- Identify system issues and responses for the governor & the legislature to act upon

In late September 2022, I spent time in the infirmary (IPU) at the Washington Corrections Center for Women (WCCW). I witnessed first-hand the unnecessary resource strain and emotional pain the current law mandates the Department of Corrections (DOC) follow. According to the outdated law, a senior patient confined to a hospital bed was not eligible for extraordinary medical placement (EMP).

Today, the patient that the OCO staff spent time with remains in the WCCW IPU. She has not left the WCCW IPU since July 2021. The DOC recognizes her medical needs and correctly provides for her care in the infirmary instead of in the general population. Yet, based on the current law, she has not qualified for an extraordinary medical placement, and no negotiation by the OCO could have made her eligible. On a bright note, Chief Medical Officer Curl shared with me this week that this patient would receive a new review. I hope Secretary Strange will approve this request should she be eligible under the current law.

According to the compassionate connected care framework model¹, there are four key elements of optimal care: clinical excellence, operational efficiency, caring behaviors, and culture. Passing SB 5101 will provide more opportunities for the Office of the Corrections Ombuds to negotiate successfully on behalf of the compassionate connected care framework. Suppose SB 5101 passes and the patient I told you about is still incarcerated at the WCCW after the bill becomes law. In that case, the OCO will be better positioned to negotiate for her EMP approval.

Current law constrains the department's good intentions. Passing SB 5101 can help reduce the financial and emotional resource drain maintaining the WCCW senior patient, and others like her, in prison demands. I welcome additional conversations with committee members. If asked, the Office of the Corrections Ombuds will provide the committee with more details about the qualitative and quantitative data I used to make my decision to provide written testimony in support of SB 5101.

Caitlin Robertson, PhD

Director

¹ Dempsey, C., Wojciechowski, S., McConville, E., & Drain, M. (2014). Reducing patient suffering through compassionate connected care. The Journal of nursing administration, 44(10), 517–524.