



OFFICE OF THE DIRECTOR

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September 3, 2020

Dear Health Equity Committee members:

We would like to sincerely thank you for your recent consideration and input regarding the Oregon Crisis Care Guidance (CCG) during your August 13th Health Equity Committee meeting.

OHA has been considering your input and reviewing the current Crisis Care Guidance as well as the work of the regional Crisis Care Community Ethics Task Force. Based on our thorough consideration of this topic, OHA will be launching a new process with health equity as its primary focus.

We appreciate the work of dedicated Oregon health care providers that have convened intermittently since 2014, with the assistance of the OHA, to discuss and try to agree upon ways to provide health care in times of shortage. The current Crisis Care Guidance was most recently issued in June of 2018 as an outcome of these workgroup meetings.

As you know, the process to develop the current Crisis Care Guidance did not include organizations or individuals representing communities of color, tribal communities, or people with disabilities. OHA takes responsibility for this failure. The current guidelines do not account for the fact that communities that have experienced long-standing health inequities due to social injustice and resulting in chronic disease may be disproportionately disadvantaged in the decision-making related to underlying conditions. Without representation from these communities in the guideline development, the guidelines have the potential to perpetuate discrimination on the basis of race, age or disability.

While the Crisis Care Guidance was intended to apply ethical principles to decision-making by health care providers during emergencies, it falls short of OHA's current core values that include: addressing clinical and social conditions, as well as the historical and contemporary injustices, which undermine health; respecting diverse cultures, populations, histories, and health practices; and consideration of the diversity of Oregon's communities as it makes policy decisions about how resources are distributed.

Because the Crisis Care Guidance does not adequately take into account the viewpoints of Oregon's diverse cultures and communities, OHA will no longer reference or rely on the 2018 Crisis Care Guidance.

OHA acknowledges the time and effort that has been given to the development of the Crisis Care Guidance to date. Again, we also thank you for your recent discussion concerning these issues and your valuable input.

Since, in times of crises, OHA and the state may be relied upon for issuing guidance or providing tools for health care providers to address health care resource shortages, it is important for OHA to lead a new effort and support the community in being fully engaged in the process. What that process will look like is unclear and OHA will be reaching out and providing opportunities for input and feedback on what shape this new effort should take, and what the outcome should be. While COVID-19 cases are declining and there are no acute resource shortages at this time, we realize that time is of the essence and OHA will move forward as quickly as it can, in concert with community partners. We ask for your patience as we navigate these important issues going forward.

Sincerely,



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