



April 30, 2015

TO: Senator Sara Gelser, Chair
Senate Human Services and Early Childhood Committee
FR: Bob Joondeph, Executive Director
RE: HB 2363

Disability Rights Oregon (DRO) is Oregon's federally-funded *Protection and Advocacy* office that provides legal-based advocacy services to Oregonians with disabilities.

Local and national attention has been focused on the failure of state mental health systems to respond to psychiatric crisis in a timely and humane fashion. The front door to crisis services in Oregon is most frequently the emergency department of hospitals. There, a person in crisis may be placed on an involuntary hold to await a civil commitment evaluation and court hearing. Some people may spend part or all of this time in emergency department due to a lack of inpatient beds. This practice, known as "boarding," was recently prohibited by a judge for people in Washington State.

Oregon law (ORS 426.072) says that people who are waiting on civil commitment holds are entitled to "the care, custody and treatment required for mental and physical health and safety" and to receive "usual and customary treatment in accordance with medical standards in the community." "Electroshock therapy or unduly hazardous treatment" is prohibited and the use of mechanical restraints must be documented.

This bill would add a requirement to ORS 426.072 that the use of seclusion also be documented. While we believe that OHA Administrative Rules and Joint Commission standards require documentation of seclusion incidents, state statute is silent on the topic.

Because isolation can be particularly harmful to people experiencing crisis, DRO believes that state law should recognize the importance of assuring that it is medically justified in writing. HB 2363 does not presume to direct or regulate medical practice but to assure that when governmental authority is being used to involuntarily hold a person, the use of potentially harmful isolation and seclusion is documented. This is of particular importance because of the ongoing "boarding" practices of many emergency departments.

For background, attached is a booklet from the federal Substance Abuse and Mental Health Services Administration entitled "The Business Case for Preventing and Reducing Restraint and Seclusion Use."

Thank you for the opportunity to submit this testimony.