



Comments on House Bill 2363
From Chris Bouneff, Executive Director, NAMI Oregon
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Senate Committee on Human Services and Early Childhood

NAMI Oregon wishes to express its support for HB 2363 as a common-sense measure to ensure that an important health care environment for individuals in mental health crises tracks data around both seclusion and restraints.

Already, hospital settings are required to document the use of restraints for individuals on an involuntary mental health hold. HB 2363 simply places the use of seclusion on par with documentation of use of restraints within a hospital setting when individuals are awaiting further evaluation and action for civil commitment.

It is well understood throughout our mental healthcare system that the use of seclusion should be documented to the same level of detail as the use of restraints, and that both are potentially harmful and should be used judiciously. Without such documentation, we cannot analyze the use of these interventions to determine whether they are used appropriately and whether steps can be taken to further limit their use by deploying more helpful interventions. In most every setting in which we provide institutional care for individuals living with mental illness, such documentation is required for both seclusion and restraints, which are two terms that go hand-in-hand within the mental healthcare system.

It is a small but important step to include documentation of seclusion or isolation so we may ensure that, when used, they are medically justified. As such, we urge your support for HB 2363.

Thank you for this opportunity to provide our input.