



Oregon State Hospital

Senate Committee on Early Childhood and Behavioral Health

House Committee on Behavioral Health

June 17, 2026



Today's Topics

- Oregon State Hospital Overview
 - What we do
 - Patient pathways to OSH and cross-system partners
- Where we are now
- Where we are going
- Accountability
- Q&A

Oregon State Hospital



- Provides the highest level of psychiatric care in the state to adults who have been committed to OSH or meet certain legal criteria under the federal order, whose safety and treatment needs cannot be met in their communities.
- Provides psychiatric, medical and psychosocial treatment and skill-building to help patients successfully return to their communities or return to jail to stand trial.
- Is accredited by the Joint Commission and certified by the Centers for Medicare and Medicaid Services.

Specialized Services for Acute Mental Health

For patients committed to OSH:

Provides hospital level of care:

- 24-hour on-site nursing and psychiatric care
- Psychiatric evaluation, diagnosis & treatment
- Medication stabilization
- Competency restoration treatment
- Forensic evaluation services

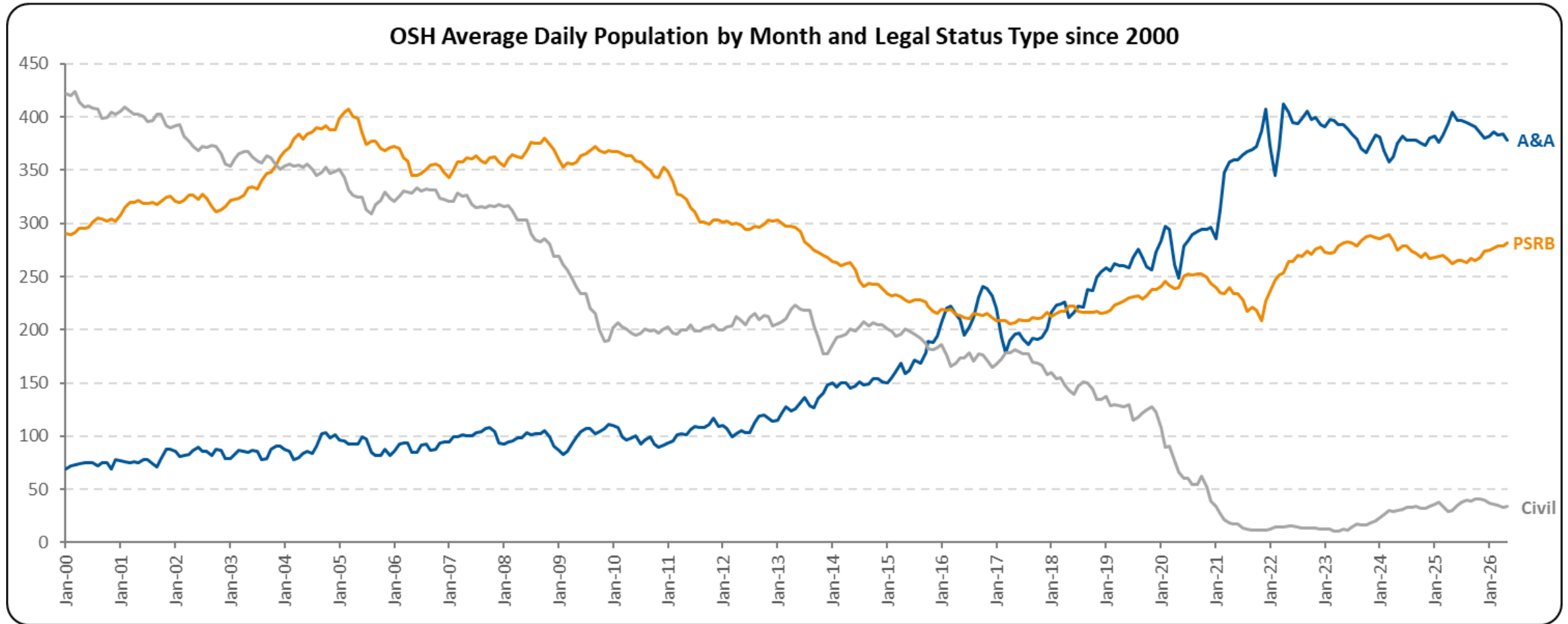
Serves adults with diagnosed or suspected mental disorders:

- Substantial percentage also have substance use disorder

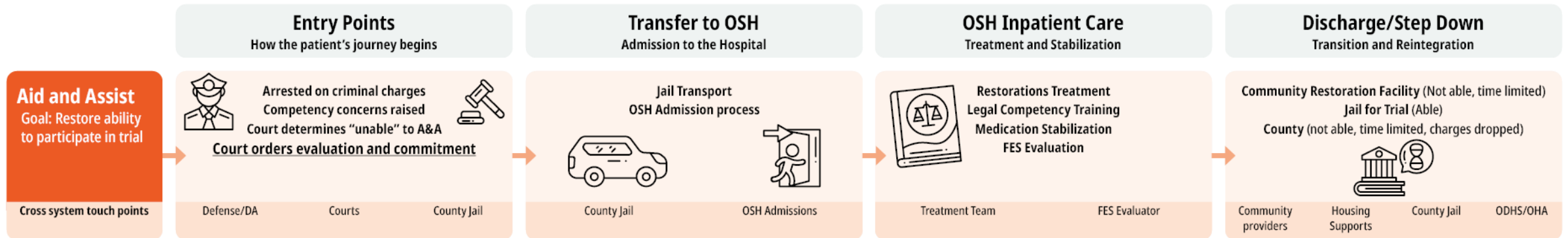
Provides two Secure Residential Treatment Facilities (SRTF) within the larger facilities

- Salem campus: Bridge units (87 patients)
- Junction City campus: Forest units (75-80 patients)

OSH Patient Population Changes

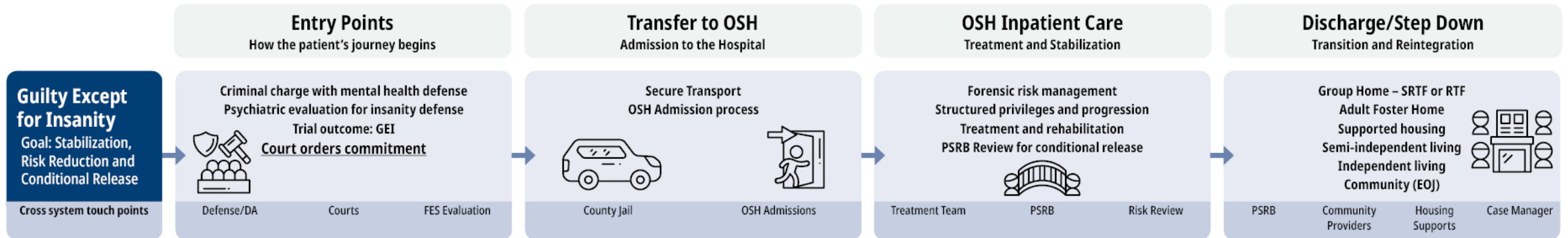


Aid and Assist Patient Journey



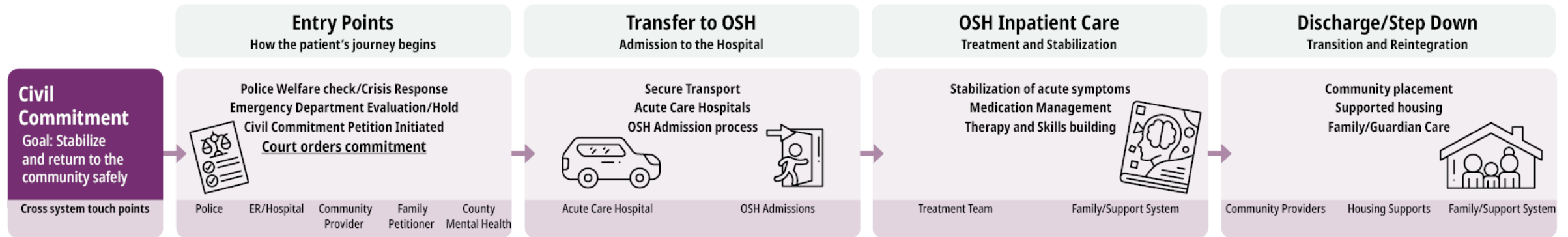
- Untreated mental illness and homelessness are increasingly criminalized.
- Many patients first exposure to mental health care is through the criminal justice system.
- Lack of access to medications in jail drive decompensation and repeat OSH admissions.
- Potential access to civil commitment would provide more comprehensive treatment, but the threshold for admission is higher.

GEI Patient Journey



- GEI patients are long-term patients who require very different treatment and services than Aid and Assist patients.
- Time at OSH focused on preparing for Psychiatric Security Review Board (PSRB) hearings by demonstrating the patient has addressed known risks and vulnerabilities.
- Outcome is to be deemed conditionally ready for community release while awaiting placement in an appropriate setting.

Civil Commitment Patient Journey



- Patients are often better served through civil commitment than through the criminal justice system.
- Additional community resources would reduce costly hospitalization.
- Civil commitment pathways should be easier to access for this population.

What does it mean to be a state-run forensic psychiatric hospital?

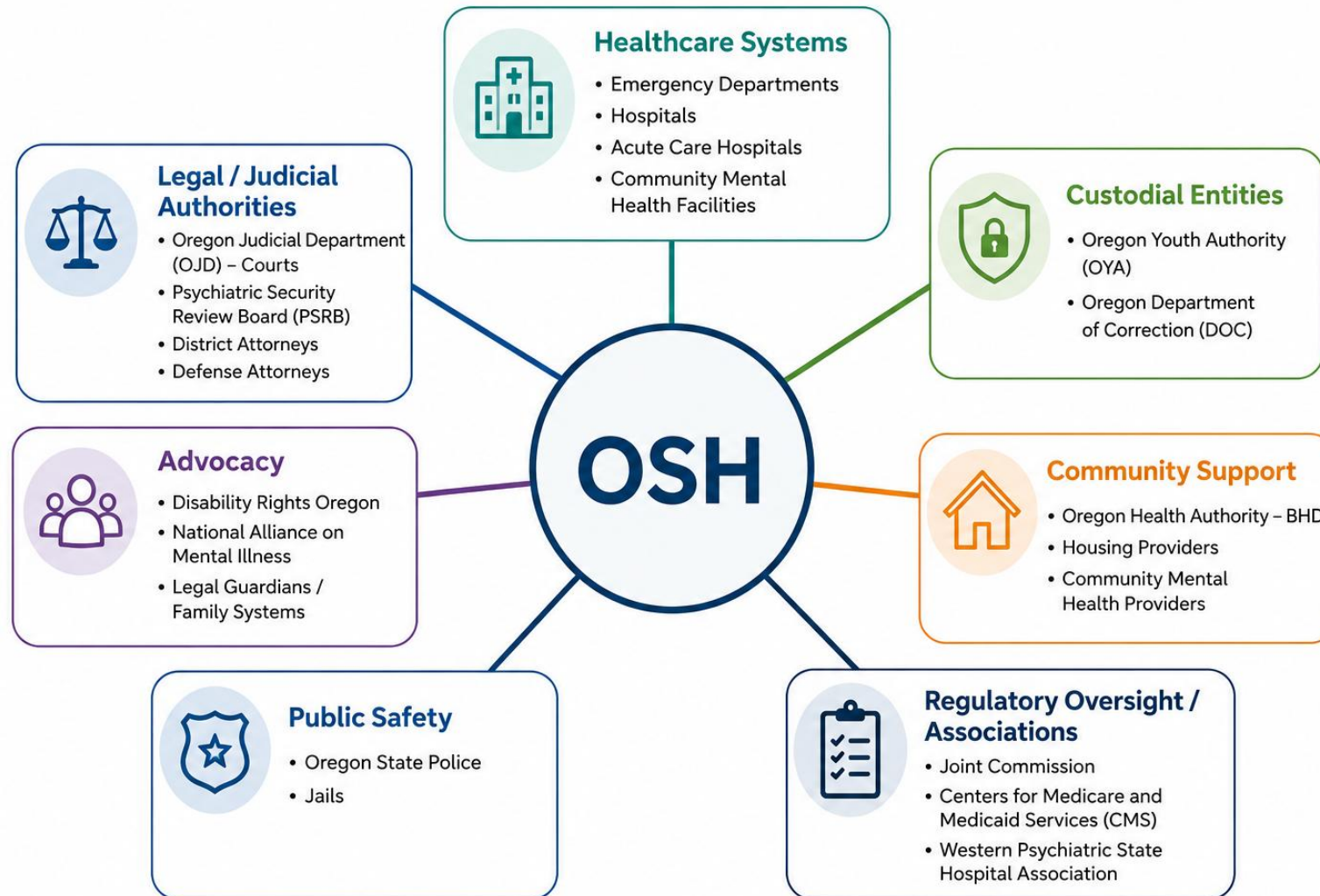
A statewide psychiatric hospital caring for individuals from across the state with the highest level of acuity, requiring intensive, specialized, 24/7 treatment.

Not a traditional medical–surgical hospital; care is specialized and centered on psychiatric treatment, behavioral stabilization, and therapeutic recovery.

Specializes on the diagnosis, treatment, and support of individuals with serious and persistent mental illness, including using involuntary medications when indicated.

Forensic – Majority of care is delivered within the intersection of mental health and the legal system, where courts, attorneys, and clinicians rely on OSH for evaluation, restoration, and long-term psychiatric care.

Cross-System Partners



OSH Leadership Recruitments

Permanent:

- Chief Medical Officer
- Chief of Psychiatry
- Chief Nursing Officer - Starting July 2026
- Superintendent

Regaining Regulatory Compliance

- **April to August 2025:** Significant hospital leadership changes. Corrective actions implemented in response to CMS and Joint Commission findings.
- **September 2025:** CMS resurveyed. New Plan of Correction developed to refine corrective actions around seclusion and falls.
- **October 2025:** Joint Commission resurveyed and found OSH in compliance. Accreditation maintained.
- **January 2026:** OSH was successful in its implementation of the corrective actions. Passed CMS resurvey successfully.

OSH Improvements

- Caregivers able to identify and escalate concerns for action when they observe a change in the patient's condition
- Daily safety huddle
- High risk case consultation occurs at all levels of hospital leadership
- Treatment care plans are modified when a change in patient condition is reported
- Incident management used to find and focus efforts to build skills and knowledge in staff about the proper use of interventions
- Updated protocols and oversight around falls and seclusion/restraints

Key Changes Related to Seclusion or Restraint

Implementation of a seclusion or restraint consult team.

Team collaborates with staff and the patient to bring the seclusion or restraint event to a safe and timely conclusion.

Updated nursing assessments to clearly articulate release criteria.

Provides more clear guidance on when a patient can be safely released.

Updated chart logs to track room cleanliness and emergency response.

Tracking room cleanliness and emergency response is transparent for monitoring staff and management.

Medical response protocols for patients in seclusion or restraint.

Provides clarity for staff to know how to enter the room if there is a medical emergency.

Time in Seclusion or Restraint

- Downward trend for seclusion events, in numbers and duration
- Upward trend for the number of restraint events
- Downward trend for average hours per event and total duration hours of restraint events

Seclusion	Oct 2024	Oct 2025	May 2026	Trend
Number of events	156	146	120	Down
Average duration (in hours) per event	28.92	5.47	2.96	Down
Total duration (in hours)	4,512.23	798.30	355.55	Down
Restraint	Oct 2024	Oct 2025	May 2026	Trend
Number of events	50	82	56	Up
Average duration (in hours) per event	6.88	3.30	2.66	Down
Total duration (in hours)	344.04	270.84	148.95	Down

Next Steps for OSH

Create long-range plans for sustainable improvements to:



Safe Environment and Consistent Operations – Creating safer settings for patients and staff that align with the needs of our current population



Predictable Patient Journey and Handoffs – Ensure a clear and predictable patient progression through the hospital



Workforce and Resource Alignment – Ensuring the right people and capabilities are in place, including training for a more acute and forensic population



Governance and Infrastructure – To make the system measurable, reliable and accountable to itself and the public

Holding OSH Accountable

OSH is committed to transparent, measurable progress focused on safety, quality, and outcomes for patients and staff.

Ask us about:



CREATING A
SAFER
ENVIRONMENT
FOR PATIENTS
AND
CAREGIVERS



STANDARDIZING
HOSPITAL
OPERATIONS



IMPROVING
TREATMENT
PROGRESSION
& DISCHARGE
READINESS



RECRUITMENT,
RETENTION,
AND
WORKFORCE
TRAINING



EFFORTS TO
STRENGTHEN
OVERSIGHT AND
ACCOUNTABILIT
Y



SYSTEM
BARRIERS
REQUIRING
LEGISLATIVE
SUPPORT OR
PARTNERSHIP

Thank you

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