

SB 834 STAFF MEASURE SUMMARY

Carrier: Sen. Gorsek

Senate Committee On Early Childhood and Behavioral Health

Action Date: 02/11/25

Action: Do pass.

Vote: 4-0-1-0

Yeas: 4 - Anderson, Gorsek, Patterson, Reynolds

Exc: 1 - Linthicum

Fiscal: Has minimal fiscal impact

Revenue: No revenue impact

Prepared By: Katie Hart, LPRO Analyst

Meeting Dates: 2/4, 2/11

WHAT THE MEASURE DOES:

The measure prohibits the Oregon State Hospital from treating patients under 18, allows psychiatric nurse practitioners to evaluate patients, and separates the roles of chief medical officer and superintendent.

Detailed Summary:

Makes the following changes to ORS 426:

- Prohibits the Oregon State Hospital from providing care or treatment to patients under 18 years of age.
- Adds psychiatric mental health nurse practitioners as providers who may determine if a patient qualifies for an “extremely dangerous” civil commitment.
- Separates the roles of chief medical officer and superintendent at the Oregon State Hospital, even if the superintendent is a physician.

Makes the following changes to ORS 161:

- Requires that initial patient evaluations must be performed by a certified evaluator.
- Replaces the term “symptomology” with the term “symptomatology.”

ISSUES DISCUSSED:

- Lack of resources across settings for people under the age of 18.

EFFECT OF AMENDMENT:

No amendment.

BACKGROUND:

The Oregon State Hospital (OSH) is established in [ORS 426.101](#) and provides psychiatric treatment for adults throughout the state who need hospital-level care. OSH treats people who have been civilly committed to the institution, who have been found by the courts to be Guilty Except for Insanity (GEI), or who are under an aid and assist order. [ORS 161.370](#) and [ORS 161.290](#) provide definitions and processes for civil commitment, GEI, and aid and assist.

SB 834 prohibits minors from receiving care at OSH, allows psychiatric nurse practitioners to determine if a patient meets requirements for “extremely dangerous” civil commitment, separates the roles of hospital superintendent and chief medical officer, requires patient evaluations be conducted by a certified evaluator, and replaces the term “symptomology” with the term “symptomatology.”