

April 13, 2017

Chairman Brian Boquist  
Senate Committee on Veterans and Emergency Preparedness  
Oregon State Senate

RE: *Senate Bill 1054*

Chairman Boquist and Committee Members,

Thank you for the invitation to comment on this very important topic. Please accept my apologies for submitting written comments in lieu of participating in the public hearing. The Committee's hearing time is valuable and I extend an invitation to the Committee or individual members to contact me directly for questions or clarification. Given the time frame of your public meeting, my prepared remarks do not contain statistical data to support my personal experience in these matters, however, I will make every effort to respond to any follow up questions the committee may have.

By way of introduction, I currently serve as the Circuit Court Judge presiding over Washington County's Mental Health Court. I am also NAMI Washington County's Board Chair. I have served in those respective positions for over five years. I do not speak on behalf of the Oregon Judicial Department, the Washington County Circuit Court, NAMI Oregon or NAMI Washington County. However, I can offer my perspective on SB 1054 and its goal of increasing the number of inpatient psychiatric beds available to our community.

The issue of expanding inpatient psychiatric care is like any other medical/social issues - strong reactions are engendered from proponents on both sides of the issue. There are those that argue an expansion of community inpatient beds is an invitation to return to the diaspora of institutionalization as a solution toward mental illness. Those advocates contend that any increase in inpatient beds will necessarily result in a reduction of money for outpatient services, or will encourage family members to utilize inpatient services as a first resort rather than considering less restrictive alternatives. My experience with both individuals and families suggests otherwise – the availability of inpatient mental health/addiction beds can be a prerequisite to successful participation in out-patient services, moreover, individuals have the

right to seek inpatient services, and lastly, the alternatives of civil commitment or criminal justice involvement neither serve public safety or are cost effective.

To understand how inpatient services is a requisite to successful outpatient services, it is important to recognize that many individuals have access to outpatient services and for a variety of reasons are not able to successfully address their mental illness. This places the burden on friends and families to resolve an escalating situation for which they do not have the tools to address. Oftentimes a period of medication stabilization in a secure facility is necessary before outpatient services can be resumed.

Similarly, there are individuals that want the benefit of an inpatient mental health/addiction program but are unable to afford the cost. As a consequence, many individuals are forced to turn to emergency rooms for help. However, emergency room care is intended as a short term placement as the legal standard for a civil commitment is high. Lastly, emergency room mental health care does commonly provide addiction treatment as a component of their inpatient treatment.

The foregoing circumstance caused by the lack of affordable inpatient mental health/addiction results in greater pressure to pursue either civil commitment proceedings or criminal justice system involvement. Either of those avenues can have dramatic unintended collateral consequences.

I am mindful there is a need for civil commitment proceedings for those with a persistent serious mental illness that requires long term care and stabilization. Likewise, there are those with a mental illness for which criminal justice system involvement is necessary and public safety is a paramount consideration. It is however my hope that individuals and families are not forced into pursuing those options because of a lack of alternatives.

With respect,

Jim Fun  
Circuit Court Judge  
Washington County

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