

# Senate Bill 171

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## SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**. The statement includes a measure digest written in compliance with applicable readability standards.

Digest: The Act makes changes to laws about when a person with a mental illness may be taken into custody. (Flesch Readability Score: 62.8).

Defines "dangerous to self," "dangerous to others" and "serious physical harm" for the purpose of involuntarily committing a person with mental illness. Describes evidence that the court may consider in civil commitment proceedings.

## A BILL FOR AN ACT

1  
2 Relating to involuntary civil commitment of persons with mental illness; creating new provisions;  
3 and amending ORS 163.738, 426.005, 426.070, 426.074, 426.130, 426.133, 426.160, 426.180, 426.225,  
4 426.228, 426.231, 426.232, 426.233, 426.234 and 430.399.

5 **Be It Enacted by the People of the State of Oregon:**

6 **SECTION 1.** ORS 426.005 is amended to read:

7 426.005. (1) As used in ORS 426.005 to 426.390, unless the context requires otherwise:

8 (a) "Community mental health program director" means the director of an entity that provides  
9 the services described in ORS 430.630 (3) to (5).

10 (b) "**Dangerous to others**" means likely to inflict significant physical harm upon another  
11 person within the next 30 days.

12 (c) "**Dangerous to self**" means likely to inflict significant physical harm to self within the  
13 next 30 days.

14 (d) "**Dangerous to self or others**" means dangerous to self or dangerous to others.

15 [(b)] (e) "Director of the facility" means a superintendent of a state mental hospital, the chief  
16 of psychiatric services in a community hospital or the person in charge of treatment and rehabili-  
17 tation programs at other treatment facilities.

18 [(c)] (f) "Facility" means a state mental hospital, community hospital, residential facility,  
19 detoxification center, day treatment facility or such other facility as the authority determines suit-  
20 able that provides diagnosis and evaluation, medical care, detoxification, social services or rehabil-  
21 itation to persons who are in custody during a prehearing period of detention or who have been  
22 committed to the Oregon Health Authority under ORS 426.130.

23 [(d)] (g) "Licensed independent practitioner" means:

24 (A) A physician, as defined in ORS 677.010;

25 (B) A nurse practitioner licensed under ORS 678.375 and authorized to write prescriptions under  
26 ORS 678.390; or

27 (C) A naturopathic physician licensed under ORS chapter 685.

28 [(e)] (h) "Nonhospital facility" means any facility, other than a hospital, that is approved by the

**NOTE:** Matter in **boldfaced** type in an amended section is new; matter [*italic and bracketed*] is existing law to be omitted. New sections are in **boldfaced** type.

1 authority to provide adequate security, psychiatric, nursing and other services to persons under ORS  
2 426.232 or 426.233.

3 [(f)] (i) "Person with mental illness" means a person who, because of a mental disorder, is one  
4 or more of the following:

5 (A) Dangerous to self or others.

6 (B) Unable to provide for basic personal needs that are necessary to avoid serious physical harm  
7 in the near future, and is not receiving such care as is necessary to avoid such harm.

8 (C) A person:

9 (i) With a chronic mental illness, as defined in ORS 426.495;

10 (ii) Who, within the previous three years, has twice been placed in a hospital or approved in-  
11 patient facility by the authority or the Department of Human Services under ORS 426.060;

12 (iii) Who is exhibiting symptoms or behavior substantially similar to those that preceded and led  
13 to one or more of the hospitalizations or inpatient placements referred to in sub-subparagraph (ii)  
14 of this subparagraph; and

15 (iv) Who, unless treated, will continue, to a reasonable medical probability, to physically or  
16 mentally deteriorate so that the person will become a person described under either subparagraph  
17 (A) or (B) of this paragraph or both.

18 [(g)] (j) "Prehearing period of detention" means a period of time calculated from the initiation  
19 of custody during which a person may be detained under ORS 426.228, 426.231, 426.232 or 426.233.

20 (k) **"Serious physical harm" means a physical injury which creates a substantial risk of**  
21 **death or which causes serious and protracted disfigurement, protracted impairment of health**  
22 **or protracted loss or impairment of the function of any bodily organ.**

23 (2) Whenever a community mental health program director, director of the facility, superinten-  
24 dent of a state hospital or administrator of a facility is referred to, the reference includes any  
25 designee such person has designated to act on the person's behalf in the exercise of duties.

26 **SECTION 2.** ORS 426.130 is amended to read:

27 426.130. (1) After hearing all of the evidence, and reviewing the findings of the examiners, the  
28 court shall determine whether the person [*has a*] **is a person with** mental illness and is in need of  
29 treatment.

30 (2)(a) **When determining whether a person is a person with mental illness based on being**  
31 **dangerous to self, the court may consider, but is not limited to considering, the person's**  
32 **threat or attempt to inflict significant physical harm upon self, including a threat or attempt**  
33 **of suicide, if the threat or attempt would cause a behavioral health clinician to reasonably**  
34 **conclude that the person is at a significant risk of self-harm.**

35 (b) **When determining whether a person is a person with mental illness based on being**  
36 **dangerous to others, the court may consider, but is not limited to considering, the person's**  
37 **threat or attempt to inflict significant physical harm upon another person, if the threat or**  
38 **attempt would place a reasonable person in fear of imminent physical harm.**

39 (c) **When determining whether a person is a person with mental illness, the court may**  
40 **consider, but is not limited to considering, any past behavior by the person that resulted in**  
41 **significant physical harm to self or significant physical harm to another person and past**  
42 **patterns of deterioration that contributed to the person being repeatedly hospitalized in in-**  
43 **patient psychiatric care.**

44 (d) **When assessing the relevance of a person's past behavior for purposes of determining**  
45 **whether the person is a person with mental illness, the court shall consider how recently the**

1 **past behavior occurred and the frequency and severity of the past behavior.**

2 (e) **As used in this subsection, “behavioral health clinician” means:**

3 (A) **A licensed psychiatrist;**

4 (B) **A licensed psychologist;**

5 (C) **A licensed nurse practitioner;**

6 (D) **A licensed professional counselor or licensed marriage and family therapist;**

7 (E) **A licensed physician;**

8 (F) **A licensed physician assistant;**

9 (G) **An intern or resident who is working under a board-approved supervisory contract**  
 10 **in a clinical mental health field; or**

11 (H) **Any other clinician whose authorized scope of practice includes mental health diag-**  
 12 **nosis and treatment.**

13 (3) **If, in the opinion of the court, the person:**

14 (a) **Is a person with mental illness based upon clear and convincing evidence, the court:**

15 (A) **Shall order the release of the person and dismiss the case if:**

16 (i) **The person is willing and able to participate in treatment on a voluntary basis; and**

17 (ii) **The court finds that the person will probably do so.**

18 (B) **May order conditional release under this subparagraph subject to the qualifications and re-**  
 19 **quirements under ORS 426.125. If the court orders conditional release under this subparagraph, the**  
 20 **court shall establish a period of commitment for the conditional release.**

21 (C) **May order commitment of the person with mental illness to the Oregon Health Authority for**  
 22 **treatment if, in the opinion of the court, subparagraph (A) or (B) of this paragraph is not in the best**  
 23 **interest of the person. If the court orders commitment under this subparagraph:**

24 (i) **The court shall establish a period of commitment.**

25 (ii) **The authority may place the committed person in outpatient commitment under ORS 426.127.**

26 (D) **Shall order that the person be prohibited from purchasing or possessing a firearm if, in the**  
 27 **opinion of the court, there is a reasonable likelihood the person [*would constitute a danger*] is dan-**  
 28 **gerous to self or others or to the community at large as a result of the person’s mental or psycho-**  
 29 **logical state as demonstrated by past behavior or participation in incidents involving unlawful**  
 30 **violence or threats of unlawful violence, or by reason of a single incident of extreme, violent, un-**  
 31 **lawful conduct. When a court makes an order under this subparagraph, the court shall cause a copy**  
 32 **of the order to be delivered to the sheriff of the county who will enter the information into the Law**  
 33 **Enforcement Data System.**

34 (b) **Is not a person with mental illness, the court shall release the person from custody if the**  
 35 **person has been detained under ORS 426.070, 426.180, 426.228, 426.232 or 426.233 and:**

36 (A) **Dismiss the case; or**

37 (B) **Order the person to participate in assisted outpatient treatment in accordance with ORS**  
 38 **426.133. The court may continue the proceeding for no more than seven days to allow time for the**  
 39 **community mental health program director to develop the person’s assisted outpatient treatment**  
 40 **plan.**

41 [(2)] (4) **A court that orders a conditional release, a commitment or assisted outpatient treat-**  
 42 **ment under this section shall establish a period of commitment or treatment for the person subject**  
 43 **to the order. Any period of commitment ordered for commitment or conditional release under this**  
 44 **section shall be for a period of time not to exceed 180 days. A period of assisted outpatient treat-**  
 45 **ment shall be for a period of time not to exceed 12 months.**

1        [(3)] (5) If the commitment proceeding was initiated under ORS 426.070 (1)(a) and if the notice  
 2 included a request under ORS 426.070 (2)(d)(B), the court shall notify the two persons of the court's  
 3 determination under [subsection (1) of] this section.

4        [(4)] (6) If the court finds that the person is a person with mental illness and either orders  
 5 commitment under subsection [(1)(a)(B)] (3)(a)(B) or (C) of this section or enters an order under  
 6 subsection [(1)(a)(D)] (3)(a)(D) of this section, the court shall notify the person that the person is  
 7 prohibited from purchasing or possessing a firearm under state and federal law unless the person  
 8 obtains relief from the prohibition from the Psychiatric Security Review Board under ORS 166.273  
 9 or under federal law.

10        **SECTION 3.** ORS 426.070 is amended to read:

11        426.070. (1) Any of the following may initiate commitment procedures under this section by giving  
 12 the notice described under subsection (2) of this section:

13        (a) Two persons;

14        (b) The local health officer; or

15        (c) Any magistrate or **any** judge of a court of a federally recognized Indian tribe located in this  
 16 state.

17        (2) For purposes of subsection (1) of this section, the notice must comply with the following:

18        (a) It must be in writing under oath;

19        (b) It must be given to the community mental health program director or a designee of the di-  
 20 rector in the county where the person alleged to have a mental illness resides;

21        (c) It must state that a person within the county other than the person giving the notice is a  
 22 person with mental illness and is in need of treatment, care or custody;

23        (d) If the commitment proceeding is initiated by two persons under subsection (1)(a) of this sec-  
 24 tion, it may include a request that the court notify the two persons:

25        (A) Of the issuance or nonissuance of a warrant under this section; or

26        (B) Of the court's determination under ORS 426.130 [(1)]; and

27        (e) If the notice contains a request under paragraph (d) of this subsection, it must also include  
 28 the addresses of the two persons making the request.

29        (3) Upon receipt of a notice under subsections (1) and (2) of this section or when notified by a  
 30 circuit court that the court received notice under ORS 426.234, the community mental health pro-  
 31 gram director, or designee of the director, shall:

32        (a) Immediately notify the judge of the court having jurisdiction for that county under ORS  
 33 426.060 of the notification described in subsections (1) and (2) of this section.

34        (b) Immediately notify the Oregon Health Authority if commitment is proposed because the  
 35 person appears to be a person with mental illness, as defined in ORS 426.005 [(1)(f)(C)] (1)(i)(C).  
 36 When such notice is received, the authority may verify, to the extent known by the authority,  
 37 whether or not the person meets the criteria described in ORS 426.005 [(1)(f)(C)(i)] (1)(i)(C)(i) and  
 38 (ii) and so inform the community mental health program director or designee of the director.

39        (c) Initiate an investigation under ORS 426.074 to determine whether there is probable cause to  
 40 believe that the person is in fact a person with mental illness.

41        (4) Upon completion, a recommendation based upon the investigation report under ORS 426.074  
 42 shall be promptly submitted to the court. If the community mental health program director deter-  
 43 mines that probable cause does not exist to believe that a person released from detention under ORS  
 44 426.234 (2)(c) or (3)(b) is a person with mental illness, the community mental health program director  
 45 may recommend assisted outpatient treatment in accordance with ORS 426.133.

1 (5) When the court receives notice under subsection (3) of this section:

2 (a) If the court, following the investigation, concludes that there is probable cause to believe  
3 that the person investigated is a person with mental illness, it shall, through the issuance of a ci-  
4 tation as provided in ORS 426.090, cause the person to be brought before it at a time and place as  
5 it may direct, for a hearing under ORS 426.095 to determine whether the person is a person with  
6 mental illness. The person shall be given the opportunity to appear voluntarily at the hearing unless  
7 the person fails to appear or unless the person is detained pursuant to paragraph (b) of this sub-  
8 section.

9 (b)(A) If the court finds that there is probable cause to believe that failure to take the person  
10 into custody pending the investigation or hearing would pose serious harm or danger to the person  
11 or to others, the court may issue a warrant of detention to the community mental health program  
12 director or designee or the sheriff of the county or designee directing the director, sheriff or a  
13 designee to take the person alleged to have a mental illness into custody and produce the person  
14 at the time and place stated in the warrant.

15 (B) At the time the person is taken into custody, the person shall be informed by the community  
16 mental health program director, the sheriff or a designee of the following:

17 (i) The person's rights with regard to representation by or appointment of counsel as described  
18 in ORS 426.100;

19 (ii) The warning under ORS 426.123; and

20 (iii) The person's right, if the community mental health program director, sheriff or designee  
21 reasonably suspects that the person is a foreign national, to communicate with an official from the  
22 consulate of the person's country. A community mental health program director, sheriff or designee  
23 is not civilly or criminally liable for failure to provide the information required by this sub-  
24 subparagraph. Failure to provide the information required by this sub-subparagraph does not in itself  
25 constitute grounds for the exclusion of evidence that would otherwise be admissible in a proceeding.

26 (C) The court may make any orders for the care and custody of the person prior to the hearing  
27 as it considers necessary.

28 (c) If the notice includes a request under subsection (2)(d)(A) of this section, the court shall  
29 notify the two persons of the issuance or nonissuance of a warrant under this subsection.

30 **SECTION 4.** ORS 426.074 is amended to read:

31 426.074. The following is applicable to an investigation initiated by a community mental health  
32 program director, or a designee of the director, as part of commitment procedures under ORS  
33 426.070 and 426.228 to 426.235:

34 (1) If the person alleged to have a mental illness is held in custody before the hearing the in-  
35 vestigation shall be completed at least 24 hours before the hearing under ORS 426.095, otherwise the  
36 investigation shall comply with the following time schedule:

37 (a) If the person can be located, the investigator shall contact the person within three judicial  
38 days from the date the community mental health program director or a designee receives a notice  
39 under ORS 426.070 alleging that the person has a mental illness and is in need of treatment.

40 (b) Within 15 days from the date the community mental health program director or a designee  
41 receives a notice under ORS 426.070, one of the following shall occur:

42 (A) The investigation shall be completed and submitted to the court.

43 (B) An application for extension shall be made to the court under paragraph (c) of this sub-  
44 section.

45 (c) The community mental health program director, a designee or the investigator may file for

1 an extension of the time under paragraph (b) of this subsection only if one of the following occurs:

2 (A) A treatment option less restrictive than involuntary inpatient commitment is actively being  
3 pursued.

4 (B) The person alleged to have a mental illness cannot be located.

5 (d) A court may grant an extension under paragraph (c) of this subsection for a time and upon  
6 the terms and conditions the court considers appropriate.

7 (2) This subsection establishes a nonexclusive list of provisions applicable to the content of the  
8 investigation, as follows:

9 (a) The investigation conducted should, where appropriate, include an interview or examination  
10 of the person alleged to have a mental illness in the home of the person or other place familiar to  
11 the person.

12 (b) Whether or not the person consents, the investigation should include interviews with any  
13 individuals that the investigator has probable cause to believe have pertinent information regarding  
14 the investigation. If the person objects to the contact with any individual, the objection shall be  
15 noted in the investigator's report.

16 (c) The investigator shall be allowed access to licensed independent practitioners, nurses or so-  
17 cial workers and to medical records compiled during the current involuntary prehearing period of  
18 detention to determine probable cause and to develop alternatives to commitment. If commitment is  
19 proposed because the person appears to be a person with mental illness as defined in ORS 426.005  
20 [(1)(f)(C)] (1)(i)(C), the investigator shall be allowed access to medical records necessary to verify  
21 the existence of criteria described in ORS 426.005 [(1)(f)(C)] (1)(i)(C). The investigator shall include  
22 pertinent parts of the medical record in the investigation report. Records and communications de-  
23 scribed in this paragraph and related communications are not privileged under ORS 40.230, 40.235,  
24 40.240 or 40.250.

25 (3) A copy of the investigation report shall be provided as soon as possible, but in no event later  
26 than 24 hours prior to the hearing, to the person and to the person's counsel. Copies shall likewise  
27 be provided to counsel assisting the court, to the examiners and to the court for use in questioning  
28 witnesses.

29 **SECTION 5.** ORS 426.133 is amended to read:

30 426.133. (1) As used in ORS 426.005 to 426.390, "assisted outpatient treatment" may not be con-  
31 strued to be a commitment under ORS 426.130 and does not include taking a person into custody  
32 or the forced medication of a person.

33 (2) A court may issue an order requiring a person to participate in assisted outpatient treatment  
34 if the court finds that the person:

35 (a)(A) Is 18 years of age or older;

36 (B) Has a mental disorder;

37 (C) Will not obtain treatment in the community voluntarily; and

38 (D) Is unable to make an informed decision to seek or to comply with voluntary treatment; and

39 (b) As a result of being a person described in paragraph (a) of this subsection:

40 (A) Is incapable of surviving safely in the community without treatment; and

41 (B) Requires treatment to prevent a deterioration in the person's condition that will predictably  
42 result in the person becoming a person with mental illness.

43 (3) In determining whether to issue the order under subsection (2) of this section, the court shall  
44 consider, but is not limited to considering, the following factors:

45 (a) The person's ability to access finances in order to get food or medicine.

- 1 (b) The person’s ability to obtain treatment for the person’s medical condition.
- 2 (c) The person’s ability to access necessary resources in the community without assistance.
- 3 (d) The degree to which there are risks to the person’s safety.
- 4 (e) The likelihood that the person will decompensate without immediate care or treatment.
- 5 (f) The person’s previous attempts to inflict physical injury on self or others.
- 6 (g) The person’s history of mental health treatment in the community.
- 7 (h) The person’s patterns of decompensation in the past.
- 8 (i) The person’s risk of being victimized or harmed by others.
- 9 (j) The person’s access to the means to inflict harm on self or others.

10 (4) The community mental health program director may recommend to the court a treatment  
 11 plan for a person participating in assisted outpatient treatment. The court may adopt the plan as  
 12 recommended or with modifications.

13 (5) As part of the order under subsection (2) of this section, the court may prohibit the person  
 14 from purchasing or possessing a firearm during the period of assisted outpatient treatment if, in the  
 15 opinion of the court, there is a reasonable likelihood the person [*would constitute a danger*] **is dan-**  
 16 **gerous** to self or others or to the community at large as a result of the person’s mental or psycho-  
 17 logical state, as demonstrated by past behavior or participation in incidents involving unlawful  
 18 violence or threats of unlawful violence, or by reason of a single incident of extreme, violent, un-  
 19 lawful conduct. When a court adds a firearm prohibition to an order under subsection (2) of this  
 20 section, the court shall cause a copy of the order to be delivered to the sheriff of the county, who  
 21 shall enter the information into the Law Enforcement Data System.

22 (6) The court retains jurisdiction over the person until the earlier of the end of the period of  
 23 the assisted outpatient treatment established under ORS 426.130 [(2)] or until the court finds that  
 24 the person no longer meets the criteria in subsection (2) of this section.

25 (7) This section does not:

- 26 (a) Prevent a court from appointing a guardian ad litem to act for the person; or
- 27 (b) Require a community mental health program to provide treatment or services to, or super-  
 28 vision of, the person:
  - 29 (A) If the county lacks sufficient funds for such purposes; or
  - 30 (B) In the case of a county that has declined to operate or contract for a community mental  
 31 health program, if the public agency or private corporation that contracts with the Oregon Health  
 32 Authority to provide the program, as described in ORS 430.640, lacks sufficient funds for such pur-  
 33 poses.

34 **SECTION 6.** ORS 426.160 is amended to read:

35 426.160. (1) The court having jurisdiction over any proceeding conducted pursuant to ORS  
 36 426.005, 426.060 to 426.170, 426.217, 426.228, 426.255 to 426.292, 426.300 to 426.309, 426.385, 426.395,  
 37 426.701 and 426.702 may not disclose any part of the record of the proceeding or commitment to any  
 38 person except:

- 39 (a) The court shall, pursuant to rules adopted by the Department of State Police, transmit the  
 40 minimum information necessary, as defined in ORS 181A.290, to the Department of State Police for  
 41 persons described in ORS 181A.290 (1)(a) or (b) to enable the department to access and maintain the  
 42 information and transmit the information to the federal government as required under federal law;
- 43 (b) As provided in ORS 426.070 (5)(c), 426.130 [(3)] (5) or 426.170;
- 44 (c) On request of the person subject to the proceeding;
- 45 (d) On request of the person’s legal representative or the attorney for the person or the state;

1 or

2 (e) Pursuant to court order.

3 (2) In any proceeding described in subsection (1) of this section that is before the Supreme Court  
 4 or the Court of Appeals, the limitations on disclosure imposed by this section apply to the appellate  
 5 court record and to the trial court record while it is in the appellate court’s custody. The appellate  
 6 court may disclose information from the trial or appellate court record in a decision, as defined in  
 7 ORS 19.450, provided that the court uses initials, an alias or some other convention for protecting  
 8 against public disclosure the identity of the person subject to the proceeding.

9 **SECTION 7.** ORS 426.180 is amended to read:

10 426.180. (1) ORS 426.180 to 426.210 apply to the commitment of an individual in Indian country  
 11 if a federally recognized Indian tribe that has Indian country located within this state chooses to  
 12 exercise the tribe’s authority over the commitment.

13 (2) As used in this section and ORS 426.200 and 426.210, “hospital” means a hospital that is li-  
 14 censed under ORS chapter 441, other than an institution listed in ORS 426.010.

15 (3) If the court of a tribe having jurisdiction over an individual issues an order finding that the  
 16 individual is dangerous to self or *[to any other person]* **others** and is in need of immediate care,  
 17 custody or treatment for mental illness, a person may request that the individual be taken by a  
 18 tribal police officer or other peace officer to a hospital or nonhospital facility by submitting to the  
 19 officer a certified copy of the order and an affidavit that includes:

20 (a) The name and address of the nearest relative or legal guardian of the individual; and

21 (b) A medical history completed by one of the following, who may not be related to the indi-  
 22 vidual by blood or marriage:

23 (A) The tribe’s mental health authority, if the tribe has entered into an agreement with the state  
 24 pursuant to ORS 430.630 (9)(a)(B);

25 (B) A qualified mental health professional; or

26 (C) A licensed independent practitioner.

27 (4) Upon receipt of the order and affidavit described in subsection (3) of this section, the tribal  
 28 police officer or other peace officer shall immediately transport the individual to a hospital or a  
 29 nonhospital facility and present the individual to the hospital or nonhospital facility accompanied  
 30 by the court order and affidavit.

31 (5) The director of the hospital or nonhospital facility may refuse to admit the individual if a  
 32 licensed independent practitioner, after reviewing the documents accompanying the individual, is not  
 33 satisfied that an emergency exists or that the individual is dangerous to self or others and **is** in need  
 34 of immediate care, custody or treatment for mental illness.

35 (6) If the hospital or nonhospital facility admits the individual, the director or a licensed inde-  
 36 pendent practitioner shall notify the community mental health program director for the area and the  
 37 circuit court with jurisdiction in the area where the facility is located. Upon receipt of the notice,  
 38 the community mental health program director shall initiate commitment proceedings in accordance  
 39 with ORS 426.070.

40 (7) If an individual is admitted to a hospital or nonhospital facility under this section, any li-  
 41 censed independent practitioner who is treating the individual shall give the individual the warning  
 42 under ORS 426.123.

43 (8) This section may be applied as provided by agreement with the governing body of the res-  
 44 ervation. Payment of costs for a commitment made under this section shall be as provided under  
 45 ORS 426.250.



1 (9) The director of the hospital or nonhospital facility or licensed independent practitioner shall  
 2 notify the appropriate tribe regarding all actions taken under ORS 426.180 to 426.210 no later than  
 3 24 hours after the action is taken, except for information protected from disclosure by state or fed-  
 4 eral law.

5 **SECTION 8.** ORS 426.225 is amended to read:

6 426.225. (1) If any person who has been committed to the Oregon Health Authority under ORS  
 7 426.127 or 426.130 [(1)(a)(B)] **(3)(a)(B)** or (C) requests, during this period of commitment, voluntary  
 8 admission to a state hospital, the superintendent shall cause the person to be examined immediately  
 9 by a licensed independent practitioner. If the licensed independent practitioner finds the person to  
 10 be in need of immediate care or treatment for mental illness, the person shall be voluntarily admit-  
 11 ted.

12 (2) If any person who has been committed to the authority under ORS 426.127 or 426.130  
 13 [(1)(a)(B)] **(3)(a)(B)** or (C) requests, during this period of commitment, voluntary admission to a fa-  
 14 cility approved by the authority, the administrator of the facility shall cause the person to be ex-  
 15 amined immediately by a licensed independent practitioner. If the licensed independent practitioner  
 16 finds the person to be in need of immediate care or treatment for mental illness, and the authority  
 17 grants approval, the person shall be voluntarily admitted.

18 **SECTION 9.** ORS 426.228 is amended to read:

19 426.228. (1) A peace officer may take into custody a person who the officer has probable cause  
 20 to believe is dangerous to self or [*to any other person*] **others** and is in need of immediate care,  
 21 custody or treatment for mental illness. As directed by the community mental health program di-  
 22 rector, a peace officer shall remove a person taken into custody under this section to the nearest  
 23 hospital or nonhospital facility approved by the Oregon Health Authority. The officer shall prepare  
 24 a written report and deliver it to the licensed independent practitioner who is treating the person.  
 25 The report shall state:

26 (a) The reason for custody;

27 (b) The date, time and place the person was taken into custody; and

28 (c) The name of the community mental health program director and a telephone number where  
 29 the director may be reached at all times.

30 (2) A peace officer shall take a person into custody when the community mental health program  
 31 director, pursuant to ORS 426.233, notifies the peace officer that the director has probable cause to  
 32 believe that the person is imminently dangerous to self or [*to any other person*] **others**. As directed  
 33 by the community mental health program director, the peace officer shall remove the person to a  
 34 hospital or nonhospital facility approved by the authority. The community mental health program  
 35 director shall prepare a written report that the peace officer shall deliver to the licensed inde-  
 36 pendent practitioner who is treating the person. The report shall state:

37 (a) The reason for custody;

38 (b) The date, time and place the person was taken into custody; and

39 (c) The name of the community mental health program director and a telephone number where  
 40 the director may be reached at all times.

41 (3) If more than one hour will be required to transport the person to the hospital or nonhospital  
 42 facility from the location where the person was taken into custody, the peace officer shall obtain,  
 43 if possible, a certificate from a licensed independent practitioner stating that the travel will not be  
 44 detrimental to the person's physical health and that the person is dangerous to self or [*to any other*  
 45 *person*] **others** and is in need of immediate care or treatment for mental illness. The licensed inde-

1 pendent practitioner shall have personally examined the person within 24 hours prior to signing the  
2 certificate.

3 (4) When a peace officer or other authorized individual, acting under this section, delivers a  
4 person to a hospital or nonhospital facility, a licensed independent practitioner shall examine the  
5 person immediately. If the licensed independent practitioner finds the person to be in need of  
6 emergency care or treatment for mental illness, the licensed independent practitioner shall proceed  
7 under ORS 426.232, otherwise the person may not be retained in custody. If the person is to be re-  
8 leased from custody, the peace officer or the community mental health program director shall return  
9 the person to the place where the person was taken into custody unless the person declines that  
10 service.

11 (5) A peace officer may transfer a person in custody under this section to the custody of an in-  
12 dividual authorized by the community mental health program director under ORS 426.233 (3). The  
13 peace officer may meet the authorized individual at any location that is in accordance with ORS  
14 426.140 to effect the transfer. When transferring a person in custody to an authorized individual, the  
15 peace officer shall deliver the report required under subsections (1) and (2) of this section to the  
16 authorized individual.

17 (6) An individual authorized under ORS 426.233 (3) shall take a person into custody when di-  
18 rected to do so by a peace officer or by a community mental health program director under ORS  
19 426.233.

20 (7) An individual authorized under ORS 426.233 (3) shall perform the duties of the peace officer  
21 or the community mental health program director required by this section and ORS 426.233 if the  
22 peace officer or the director has not already done so.

23 (8) An individual authorized under ORS 426.233 (3) may transfer a person in custody under this  
24 section to the custody of another individual authorized under ORS 426.233 (3) or a peace officer. The  
25 individual transferring custody may meet another authorized individual or a peace officer at any  
26 location that is in accordance with ORS 426.140 to effect the transfer.

27 (9)(a) When a peace officer takes a person into custody under this section, and the peace officer  
28 reasonably suspects that the person is a foreign national, the peace officer shall inform the person  
29 of the person's right to communicate with an official from the consulate of the person's country.

30 (b) A peace officer is not civilly or criminally liable for failure to provide the information re-  
31 quired by this subsection. Failure to provide the information required by this subsection does not  
32 in itself constitute grounds for the exclusion of evidence that would otherwise be admissible in a  
33 proceeding.

34 **SECTION 10.** ORS 426.231 is amended to read:

35 426.231. (1) A licensed independent practitioner may hold a person for transportation to a  
36 treatment facility for up to 12 hours in a health care facility licensed under ORS chapter 441 and  
37 approved by the Oregon Health Authority if:

38 (a) The licensed independent practitioner believes the person is dangerous to self or [*to any*  
39 *other person*] **others** and is in need of emergency care or treatment for mental illness;

40 (b) The licensed independent practitioner is not related to the person by blood or marriage; and

41 (c) A licensed independent practitioner with admitting privileges at the receiving facility con-  
42 sents to the transporting.

43 (2) Before transporting the person, the licensed independent practitioner shall prepare a written  
44 statement that:

45 (a) The licensed independent practitioner has examined the person within the preceding 12

1 hours;

2 (b) A licensed independent practitioner with admitting privileges at the receiving facility has  
3 consented to the transporting of the person for examination and admission if appropriate; and

4 (c) The licensed independent practitioner believes the person is dangerous to self or [*to any other*  
5 *person*] **others** and is in need of emergency care or treatment for mental illness.

6 (3) The written statement required by subsection (2) of this section authorizes a peace officer,  
7 an individual authorized under ORS 426.233 or the designee of a community mental health program  
8 director to transport a person to the treatment facility indicated on the statement.

9 **SECTION 11.** ORS 426.232 is amended to read:

10 426.232. (1) If a licensed independent practitioner believes a person who is brought to a hospital  
11 or nonhospital facility by a peace officer under ORS 426.228 or by an individual authorized under  
12 ORS 426.233, or believes a person who is at a hospital or nonhospital facility, is dangerous to self  
13 or [*to any other person*] **others** and is in need of emergency care or treatment for mental illness,  
14 and the licensed independent practitioner is not related to the person by blood or marriage, the li-  
15 censed independent practitioner may do one of the following:

16 (a) Detain the person and cause the person to be admitted or, if the person is already admitted,  
17 cause the person to be retained in a hospital where the licensed independent practitioner has ad-  
18 mitting privileges or is on staff.

19 (b) Approve the person for emergency care or treatment at a nonhospital facility approved by  
20 the authority.

21 (2) When approving a person for emergency care or treatment at a nonhospital facility under  
22 this section, the licensed independent practitioner shall notify immediately the community mental  
23 health program director in the county where the person was taken into custody and maintain the  
24 person, if the person is being held at a hospital, for as long as is feasible given the needs of the  
25 person for mental or physical health or safety. However, under no circumstances may the person  
26 be held for longer than five judicial days.

27 **SECTION 12.** ORS 426.233 is amended to read:

28 426.233. (1)(a) A community mental health program director operating under ORS 430.610 to  
29 430.695 or a designee of the director may take one of the actions listed in paragraph (b) of this  
30 subsection when the community mental health program director or designee has probable cause to  
31 believe a person:

32 (A) Is dangerous to self or [*to any other person*] **others** and is in need of immediate care, custody  
33 or treatment for mental illness; or

34 (B)(i) Is a person with mental illness placed on conditional release under ORS 426.125, outpatient  
35 commitment under ORS 426.127 or trial visit under ORS 426.273; and

36 (ii) Is dangerous to self or [*to any other person*] **others** or is unable to provide for basic personal  
37 needs and is not receiving the care that is necessary for health and safety and is in need of imme-  
38 diate care, custody or treatment for mental illness.

39 (b) The community mental health program director or designee under the circumstances set out  
40 in paragraph (a) of this subsection may:

41 (A) Notify a peace officer to take the person into custody and direct the officer to remove the  
42 person to a hospital or nonhospital facility approved by the Oregon Health Authority;

43 (B) Authorize involuntary admission of, or, if already admitted, cause to be involuntarily re-  
44 tained in a nonhospital facility approved by the authority, a person approved for care or treatment  
45 at a nonhospital facility by a licensed independent practitioner under ORS 426.232;

1 (C) Notify an individual authorized under subsection (3) of this section to take the person into  
2 custody and direct the authorized individual to remove the person in custody to a hospital or non-  
3 hospital facility approved by the authority;

4 (D) Direct an individual authorized under subsection (3) of this section to transport a person in  
5 custody from a hospital or a nonhospital facility approved by the authority to another hospital or  
6 nonhospital facility approved by the authority as provided under ORS 426.235; or

7 (E) Direct an individual authorized under subsection (3) of this section to transport a person in  
8 custody from a facility approved by the authority to another facility approved by the authority as  
9 provided under ORS 426.060.

10 (2) A designee under subsection (1) of this section must meet the standards established by rule  
11 of the authority and be approved by the community mental health program director before assuming  
12 the authority permitted under subsection (1) of this section.

13 (3) The community mental health program director may authorize any individual to provide  
14 custody and secure transportation services for a person in custody under ORS 426.228. In author-  
15 izing an individual under this subsection, the community mental health program director shall grant  
16 the individual the authority to do the following:

17 (a) Accept custody from a peace officer of a person in custody under ORS 426.228;

18 (b) Take custody of a person upon notification by the community mental health program director  
19 under the provisions of this section;

20 (c) Remove a person in custody to an approved hospital or nonhospital facility as directed by  
21 the community mental health program director;

22 (d) Transfer a person in custody to another individual authorized under this subsection or a  
23 peace officer;

24 (e) Transfer a person in custody from a hospital or nonhospital facility to another hospital fa-  
25 cility or nonhospital facility when directed to do so by the community mental health program di-  
26 rector; and

27 (f) Retain a person in custody at the approved hospital or nonhospital facility until a licensed  
28 independent practitioner makes a determination under ORS 426.232.

29 (4) An individual authorized under subsection (3) of this section must meet the standards estab-  
30 lished by rule of the authority and be approved by the community mental health program director  
31 before assuming the authority granted under this section.

32 (5) The costs of transporting a person under ORS 426.060, 426.228 or 426.235 by an individual  
33 authorized under subsection (3) of this section shall be the responsibility of the community mental  
34 health program in the county in which the authorized individual is directed by a peace officer or a  
35 community mental health program director to take custody of a person and to transport the person  
36 to a facility approved by the authority, but the community mental health program shall not be re-  
37 sponsible for costs that exceed the amount provided by the state for that transportation. An indi-  
38 vidual authorized to act under subsection (3) of this section shall charge the cost of emergency  
39 medical transportation to, and collect that cost from, the person, third party payers or other legally  
40 or financially responsible individuals or entities in the same manner that costs for the transportation  
41 of other persons are charged and collected.

42 **SECTION 13.** ORS 426.234 is amended to read:

43 426.234. (1) At the time a person alleged to have a mental illness is admitted to or retained in  
44 a hospital or nonhospital facility under ORS 426.232 or 426.233, a licensed independent practitioner,  
45 nurse or qualified mental health professional at the hospital or nonhospital facility shall:

1 (a) Inform the person of the person's right to representation by or appointment of counsel as  
2 described in ORS 426.100;

3 (b) Give the person the warning under ORS 426.123;

4 (c) Immediately examine the person;

5 (d) Set forth, in writing, the condition of the person and the need for emergency care or treat-  
6 ment; and

7 (e) If the licensed independent practitioner, nurse or qualified mental health professional rea-  
8 sonably suspects that the person is a foreign national, inform the person of the person's right to  
9 communicate with an official from the consulate of the person's country. A licensed independent  
10 practitioner, nurse or qualified mental health professional is not civilly or criminally liable for fail-  
11 ure to provide the information required by this paragraph. Failure to provide the information re-  
12 quired by this paragraph does not in itself constitute grounds for the exclusion of evidence that  
13 would otherwise be admissible in a proceeding.

14 (2)(a) At the time the person is admitted to or retained in a hospital under ORS 426.232, the li-  
15 censed independent practitioner shall contact the community mental health program director of the  
16 county in which the person resides, if the county of residence is different from the county in which  
17 the hospital is located. The community mental health program director may request that the licensed  
18 independent practitioner notify the circuit court in the county in which the person resides. If the  
19 community mental health program director does not make the request, the licensed independent  
20 practitioner shall notify, immediately and in writing, the circuit court in the county in which the  
21 person is hospitalized.

22 (b) At the time the person is admitted to a hospital under ORS 426.232 after being brought to  
23 the hospital by a peace officer under ORS 426.228, the licensed independent practitioner shall con-  
24 tact the community mental health program director of the county in which the person is hospital-  
25 ized. The community mental health program director of the county in which the person is  
26 hospitalized may request that the licensed independent practitioner notify the circuit court in the  
27 county in which the person is hospitalized. If the community mental health program director does  
28 not make the request, the licensed independent practitioner shall notify, immediately and in writing,  
29 the circuit court in the county in which the person was taken into custody.

30 (c) If, at any time prior to the hearing under ORS 426.070 to 426.130, the licensed independent  
31 practitioner responsible for a person admitted or retained under ORS 426.232 determines that the  
32 person is not dangerous to self or *[to any other person]* **others** and is not in need of emergency care  
33 or treatment for mental illness, the licensed independent practitioner may release the person from  
34 the detention authorized by ORS 426.232. The licensed independent practitioner shall immediately  
35 notify the circuit court notified under this subsection and the community mental health program  
36 director of the person's release from detention.

37 (3)(a) At the time the person is admitted to or retained in a nonhospital facility under ORS  
38 426.233, the community mental health program director in the county where the person was taken  
39 into custody shall contact the community mental health program director of the county in which the  
40 person resides, if the county of residence is different from the county in which the person was taken  
41 into custody. The community mental health program director of the county in which the person re-  
42 sides may request that the community mental health program director of the county in which the  
43 person was taken into custody notify the circuit court in the county where the person resides.  
44 Otherwise, the community mental health program director of the county in which the person was  
45 taken into custody shall notify, immediately and in writing, the circuit court in the county in which

1 the person was taken into custody.

2 (b) If, at any time prior to the hearing under ORS 426.070 to 426.130, a community mental health  
3 program director, after consultation with a licensed independent practitioner, determines that a  
4 person admitted or retained under ORS 426.233 is not dangerous to self or [*to any other person*]  
5 **others** and is not in need of immediate care, custody or treatment for mental illness, the community  
6 mental health program director may release the person from detention. The community mental  
7 health program director shall immediately notify the circuit court originally notified under para-  
8 graph (a) of this subsection of the person's release from detention.

9 (4) When the judge of the circuit court receives notice under subsection (2) or (3) of this section,  
10 the judge immediately shall commence proceedings under ORS 426.070 to 426.130. In a county having  
11 a population of 100,000 or more, and when feasible in a county with a lesser population, the com-  
12 munity mental health program director or designee who directs the peace officer or other authorized  
13 individual to take a person into custody under ORS 426.233 shall not also conduct the investigation  
14 as provided for under ORS 426.074. Except when a person is being held under ORS 426.237 (1)(b), a  
15 person shall not be held under ORS 426.232 or 426.233 for more than five judicial days without a  
16 hearing being held under ORS 426.070 to 426.130.

17 (5) When the judge of the circuit court receives notice under subsection (2)(c) or (3)(b) of this  
18 section that a person has been released, and unless the court receives the recommendation required  
19 by ORS 426.070 (4), the judge shall dismiss the case no later than 14 days after the date the person  
20 was initially detained.

21 **SECTION 14.** ORS 430.399, as amended by section 80, chapter 70, Oregon Laws 2024, is  
22 amended to read:

23 430.399. (1) Any person who is intoxicated or under the influence of controlled substances in a  
24 public place may be sent home or taken to a sobering facility or to an appropriate facility by a po-  
25 lice officer or a member of a mobile crisis intervention team as defined in ORS 430.626. If the person  
26 is incapacitated, the person shall be taken by the police officer or team member to an appropriate  
27 facility or sobering facility. If the health of the person appears to be in immediate danger, or the  
28 police officer or team member has reasonable cause to believe the person is dangerous to self or  
29 [*to any other person*] **others, as defined in ORS 426.005**, the person shall be taken by the police  
30 officer or team member to an appropriate facility or sobering facility. A person shall be deemed in-  
31 capacitated when in the opinion of the police officer or team member the person is unable to make  
32 a rational decision as to acceptance of assistance.

33 (2) When a person is taken to an appropriate facility, the director of the facility shall determine  
34 whether the person shall be admitted as a patient, referred to another facility or a sobering facility  
35 or denied referral or admission. If the person is incapacitated or the health of the person appears  
36 to be in immediate danger, or if the director has reasonable cause to believe the person is dangerous  
37 to self or [*to any other person*] **others, as defined in ORS 426.005**, the person must be admitted.  
38 The person shall be discharged within 72 hours unless the person has applied for voluntary admis-  
39 sion to the facility.

40 (3) When a person is taken to a sobering facility, the staff of the sobering facility shall, con-  
41 sistent with the facility's comprehensive written policies and procedures, determine whether or not  
42 the person shall be admitted into the sobering facility. A person who is admitted shall be discharged  
43 from the sobering facility within 24 hours.

44 (4) In the absence of any appropriate facility or sobering facility, or if a sobering facility de-  
45 termines that a person should not be admitted to the sobering facility, an intoxicated person or a

1 person under the influence of controlled substances who would otherwise be taken by a police offi-  
 2 cer to an appropriate facility or sobering facility may be taken to the city or county jail where the  
 3 person may be held until no longer intoxicated, under the influence of controlled substances or in-  
 4 capacitated.

5 (5) An intoxicated person or person under the influence of controlled substances, when taken  
 6 into custody by the police officer for a criminal offense, shall immediately be taken to the nearest  
 7 appropriate facility when the condition of the person requires emergency medical treatment.

8 (6) The records of a person at an appropriate facility or sobering facility may not, without the  
 9 person's consent, be revealed to any person other than the director and staff of the facility or so-  
 10 bering facility. A person's request that no disclosure be made of admission to a facility or sobering  
 11 facility shall be honored unless the person is incapacitated or disclosure of admission is required  
 12 by ORS 430.397.

13 **SECTION 15.** ORS 163.738 is amended to read:

14 163.738. (1)(a) A citation shall notify the respondent of a circuit court hearing where the re-  
 15 spondent shall appear at the place and time set forth in the citation. The citation shall contain:

- 16 (A) The name of the court at which the respondent is to appear;
- 17 (B) The name of the respondent;
- 18 (C) A copy of the stalking complaint;
- 19 (D) The date, time and place at which the citation was issued;
- 20 (E) The name of the law enforcement officer who issued the citation;
- 21 (F) The time, date and place at which the respondent is to appear in court;
- 22 (G) Notice to the respondent that failure to appear at the time, date and place set forth in the  
 23 citation shall result in the respondent's arrest and entry of a court's stalking protective order; and
- 24 (H) Notice to the respondent of potential liability under federal law for the possession or pur-  
 25 chase of firearms or firearm ammunition and for other acts prohibited by 18 U.S.C. 2261 to 2262.

26 (b) The officer shall notify the petitioner in writing of the place and time set for the hearing.

27 (2)(a) The hearing shall be held as indicated in the citation. At the hearing, the petitioner may  
 28 appear in person or by telephonic appearance. The respondent shall be given the opportunity to  
 29 show cause why a court's stalking protective order should not be entered. The hearing may be  
 30 continued for up to 30 days. The court may enter:

- 31 (A) A temporary stalking protective order pending further proceedings; or
- 32 (B) A court's stalking protective order if the court finds by a preponderance of the evidence  
 33 that:

34 (i) The person intentionally, knowingly or recklessly engages in repeated and unwanted contact  
 35 with the other person or a member of that person's immediate family or household thereby alarming  
 36 or coercing the other person;

37 (ii) It is objectively reasonable for a person in the victim's situation to have been alarmed or  
 38 coerced by the contact; and

39 (iii) The repeated and unwanted contact causes the victim reasonable apprehension regarding  
 40 the personal safety of the victim or a member of the victim's immediate family or household.

41 (b) In the order, the court shall specify the conduct from which the respondent is to refrain,  
 42 which may include all contact listed in ORS 163.730 and any attempt to make contact listed in ORS  
 43 163.730. The order is of unlimited duration unless limited by law. If the respondent was provided  
 44 notice and an opportunity to be heard, the court shall also include in the order, when appropriate,  
 45 terms and findings sufficient under 18 U.S.C. 922 (d)(8) and (g)(8) to affect the respondent's ability

1 to possess firearms and ammunition or engage in activities involving firearms.

2 (3) The circuit court may enter an order under this section against a minor respondent without  
3 appointment of a guardian ad litem.

4 (4) If the respondent fails to appear at the time, date and place specified in the citation, the  
5 circuit court shall issue a warrant of arrest as provided in ORS 133.110 in order to ensure the ap-  
6 pearance of the respondent at court and shall enter a court's stalking protective order.

7 (5) The circuit court may also order the respondent to undergo mental health evaluation and,  
8 if indicated by the evaluation, treatment. If the respondent is without sufficient resources to obtain  
9 the evaluation or treatment, or both, the court shall refer the respondent to the mental health  
10 agency designated by the community mental health director for evaluation or treatment, or both.

11 (6) If the circuit court, the mental health evaluator or any other persons have probable cause  
12 to believe that the respondent is dangerous to self or others, **as defined in ORS 426.005**, or is un-  
13 able to provide for basic personal needs, the court shall initiate commitment procedures as provided  
14 in ORS 426.070 or 426.180.

15 (7) A law enforcement officer shall report the results of any investigation arising from a com-  
16 plaint under ORS 163.744 to the district attorney within three days after presentation of the com-  
17 plaint.

18 (8) Except for purposes of impeachment, a statement made by the respondent at a hearing under  
19 this section may not be used as evidence in a prosecution for stalking as defined in ORS 163.732 or  
20 for violating a court's stalking protective order as defined in ORS 163.750.

21 **SECTION 16. The amendments to ORS 163.738, 426.005, 426.070, 426.074, 426.130, 426.133,**  
22 **426.160, 426.180, 426.225, 426.228, 426.231, 426.232, 433.233, 426.234 and 430.399 by sections 1 to**  
23 **15 of this 2025 Act apply to individuals who are taken into custody by a treatment facility**  
24 **or law enforcement on or after the effective date of this 2025 Act.**

25