

**TESTIMONY ON HOUSE BILL 2632  
BEFORE THE HOUSE COMMITTEE ON JUDICIARY  
APRIL 1, 2025**

**PRESENTED BY: CHANNA NEWELL, SENIOR STAFF COUNSEL FOR  
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Chair Kropf, Vice-Chairs Chotzen and Wallan, and Members of the Committee:

The -2 amendments to House Bill (HB) 2632 focus on three recommendations from the HB 4001 (2024) Specialty Court Task Force:

1. Create a multidisciplinary Chief Justice Treatment Court Advisory Committee;
2. Update the statutory language to refer to specialty courts as “treatment courts”;  
and
3. Standardize and improve the collection of important treatment court data.

Each of these recommendations were unanimously approved by the Specialty Court Task Force, have little to no associated cost, and provide a platform to continue the work of the Task Force.

Two amendments have been put on the record that take slightly different approaches to meeting the recommendations of the Task Force. The -2 amendments provide the Chief Justice with greater flexibility in creating and running the Advisory Committee and have language aimed at improving data collection that is not included in the -1 amendments. The Oregon Judicial Department (OJD’s) preference is to build upon the -2 amendments by offering a few small additional changes as outlined below.

Treatment courts are an integral part of the justice system that leverage a multidisciplinary, team-based approach to connect high-risk, high-need individuals with personalized, evidence-based treatment and recovery support services. The success of treatment courts is due to local partner collaboration within a validated, evidence-based model focusing on a particular target population, such as individuals suffering from substance use, mental health, and/or behavioral health disorders. These programs apply techniques proven to reduce recidivism, increase public safety, and achieve success for the individuals and communities in which they live.

The [treatment court model](#) is well-studied.<sup>1</sup> The [Criminal Justice Commission \(CJC\) conducted a recidivism analysis](#) of OJD’s treatment courts in 2023 and found that 75 percent of treatment court participants who successfully completed the program were not re-arrested within three years of completion, compared to 41 percent of treatment

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<sup>1</sup> National Association of Drug Court Professionals, 10 Key Components of Drug Courts:  
<https://allrise.org/wp-content/uploads/2022/07/Defining-Drug-Courts-The-Key-Components.pdf>

court participants who did not complete the program and 35 percent of people who were referred to a treatment court but did not enter.

In 2024, the legislature passed HB 4001, which created the Specialty Court Task Force to study and make recommendations related to funding mechanisms, the administrative and funding balance between the CJC and OJD, how best to determine eligibility for treatment court participants, and accountability mechanisms for the treatment courts themselves. The Task Force met nine times over the course of five months to study and discuss the treatment court model. Its [report](#), which was released on November 8, 2024, included 14 recommendations. While all of the recommendations have merit, the -2 amendments to HB 2632 focus on three unanimous Task Force recommendations that have little to no cost for short term implementation. The remaining recommendations require additional work to determine the resources and costs associated with their implementation. We anticipate that the remaining recommendations will be addressed by the Chief Justice's Treatment Court Advisory Committee proposed by the -2 amendments and the forthcoming amendments.

- **HB 2632-2 will continue the work of the Specialty Court Task Force by creating a multidisciplinary Chief Justice Treatment Court Advisory Committee.** The Committee would be staffed by OJD with existing resources, and members would be appointed by the Chief Justice. The Committee would significantly mirror the composition of the originating Task Force, incorporating a range of perspectives drawn from across treatment and justice communities. Upon the conclusion of its work, the Task Force noted that many complex issues merited further exploration. The Committee would be the vehicle for that continuing conversation.
  - The forthcoming amendment will make a small clarification to the membership of the Advisory Committee by adding both the Oregon Youth Authority and the Oregon Juvenile Department Directors' Association as members of the Committee.
- **HB 2632-2 changes the current statutory terms “specialty court” and “drug court” to “treatment court.”** Specialty court is the umbrella term used in Oregon’s statutes to refer to courts that follow the treatment court model. The term specialty court includes adult drug courts, family treatment courts, mental health courts, juvenile treatment courts, veterans’ treatment courts, and DUII courts. Changing statutory terminology from “specialty court” or “drug court” to “treatment court” better reflects the focus of these courts, which is connecting participants to treatment and rehabilitation services under the supervision of a range of justice system partners. “Treatment court” is the generally accepted term for these types of courts across the country.<sup>2</sup> Using the term “treatment court” would also help distinguish these courts from problem-solving courts and

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<sup>2</sup> All Rise (formerly the National Association of Drug Court Professionals), About Treatment Courts: <https://allrise.org/about/treatment-courts/>.

National Center for State Courts, Treatment Courts: <https://www.ncsc.org/consulting-and-research/areas-of-expertise/behavioral-health/treatment-courts>.

other specialized dockets, like domestic violence deferred sentencing courts, which are not based on the treatment court model.

- **HB 2632-2 updates the definition of specialty court.** Currently, ORS 137.680 defines specialty courts as drug courts, veterans' courts, mental health courts and other similar court or docketing systems. The language in section 3 of HB 2632-2 improves the definition by incorporating the standards by reference to subparagraph (A), but it only lists three treatment court types – veterans' courts, mental health courts, and family courts. Each treatment court type serves a specific target population, and we believe it is important to memorialize each type of treatment court in statute.
  - The forthcoming amendment revises the language in the -2 amendment to include all treatment court types, including adult drug courts, juvenile treatment courts, and DUII treatment courts. OJD suggests removing the language “may include but is not limited to” and the reference to “docketing system” because the language “any other similar court that meets the requirements in subparagraph (A)” is sufficient to include all future courts that follow the model.
- **HB 2632-2 would help to standardize and improve the collection of important treatment court data.** Treatment courts are most effective when they adhere to the proven treatment court model. Use of a standardized case management system allows all team members the ability to monitor participant progress and to enter data on critical milestones. Capturing data is important to assess court effectiveness and to ensure adherence to the model. As a part of the CJC's existing treatment court grant program, circuit court programs are required to use OJD's case management system. This change does not require each team member to enter data into the system, but rather steers programs towards using the system for information sharing, case management, and program monitoring in their ongoing efforts to align with the treatment court model.
  - OJD has asked for a clarification in section 3 of HB 2632-2 to ensure the language matches this intent.

The Task Force also recommended providing funding to OJD for its treatment court case management system. The 2025-2027 Chief Justice's Recommended Budget POP 109 includes a request for licenses and maintenance for OJD's treatment court case management system, which would serve as the foundation to support this work.

HB 2632 and the forthcoming amendments are an important step in advancing the recommendations of the Specialty Court Task Force, by providing a framework to continue the Task Force's work through a Chief Justice Treatment Court Advisory Committee, modernizing statutory terminology, and ensuring that data is available to evaluate and assist courts in producing the best outcomes for participants and their communities.