



TO: House Committee On Judiciary
FROM: Jake Cornett, Disability Rights Oregon
DATE: February 11, 2026
RE: Oppose HB 4106 (2026) – Oppose Expanded Immunity in Involuntary Treatment Transport

Chair Kropf, Vice-Chair Chotzen, Vice-Chair Wallan, and Members of the Committee,

My name is Jake Cornett, and I'm submitting testimony in opposition to HB 4106 on behalf of Disability Rights Oregon.

At a time when the public is clamoring for law enforcement accountability, HB 4106 moves in the opposite direction.

HB 4106 would expand immunity by providing that, in addition to existing liability limits, a peace officer "may not be held criminally or civilly liable" for using restraints or physical force during the transportation of a person under Oregon's civil commitment and related statutes, so long as the officer reasonably believes the force/restraints are necessary to protect the person, the officer, or the public, and the officer acts in "good faith and without malice."

Why We Oppose HB 4106

- 1. Law enforcement is inappropriately using restraints on people with serious mental illness, HB 4106 will remove all accountability for their actions.** Here are three examples of Disability Rights Oregon's clients who have been inappropriately restrained:

D.J., navy veteran, was experiencing a mental health crisis in Multnomah County. Police responded and restrained him in order to place a police officer hold and transport him to a medical facility. The restraint involved three officers, no mental health providers, and resulted in D.J.'s death due to a deadly and inappropriate restraint.

H.B., an air force veteran in Washington County, was experiencing a mental health crisis that included paranoia tracing back to his military service. Police arrested him on a misdemeanor charge and their restraint triggered his paranoia, leading to a use of force that likely contributed to his eventual suicide the next day.

S.B., an individual with severe and persistent mental illness in Douglas County, was transported from jail to the state hospital in a van by police officers. S.B. was completely unresponsive when placed into handcuffs and belly chains before being lifted out of his wheelchair and loaded into the back of the van. He slumped to the floor of the van during the ride and remained unconscious and unresponsive. The officers delivered S.B.

to the state hospital where he was declared dead on arrival. Officers made no effort to ensure S.B.'s safety or wellbeing during the restraints they applied.

2. **It removes meaningful accountability for a high-risk situation.** Transporting someone who is subject to involuntary treatment is one of the most vulnerable points in the civil commitment process. People in crisis—often people with disabilities in mental health conditions, with prior trauma, or cognitive impairments—are at heightened risk of injury, escalation, and re-traumatization during restraint and force encounters.
Expanding immunity in this context increases the likelihood of harm while reducing incentives for safe, de-escalation-first practices.
3. **The standard is too subjective and too easy to invoke after-the-fact.** HB 4106 hinges on an officer's "reasonable belief," "good faith," and "without malice." In practice, these concepts can be asserted in almost any use-of-force scenario—especially when the person being transported is in crisis and may be unable to effectively advocate for themselves or later describe what happened. That is precisely why external accountability is essential.
4. **It is unnecessary given existing liability limitations.** The bill explicitly stacks new immunity "in addition to any liability limitations provided under ORS 426.335(6)." When the legislature expands immunity beyond what is already in statute, it should do so only with a clear, compelling, evidence-based need. HB 4106 provides broad protection without pairing it with stronger safety requirements, transparency, or independent review.
5. **It risks normalizing restraint/force as a default, rather than a last resort.** Oregon should be moving toward least-restrictive, clinically appropriate transport whenever possible. A policy choice that primarily expands immunity—without improving training requirements, documentation, and alternatives to law enforcement transport—moves Oregon in the wrong direction.

What We Urge Instead

Reject HB 4106 and focus on reforms that reduce harm during transport, including:

- Expanded use of non-law-enforcement transport options for people in behavioral health crisis when appropriate.
- Stronger requirements for de-escalation and disability-informed practices.
- Clear limits and reporting on restraint use, with review when injury occurs.

If the committee is determined to move forward with changes in this area, HB 4106 would at minimum need substantial amendments—such as explicitly excluding immunity for gross negligence or willful misconduct, and adding robust documentation and oversight.

As introduced, however, HB 4106 is an overly broad immunity expansion that undermines safety and accountability for Oregonians subject to involuntary treatment.

For these reasons, **we respectfully urge a No vote on HB 4106.** Thank you for the opportunity to submit testimony.

If you have any questions regarding DRO's position on this legislation, please call Hans Bernard or email him at hans@growthconsulting.net.

About Disability Rights Oregon

Since 1977 Disability Rights Oregon has been the State's Protection and Advocacy System.¹ We are authorized by Congress to protect, advocate, and enforce the rights of people with disabilities under the U.S. Constitution and Federal and State laws, investigate abuse and neglect of people with disabilities, and "pursue administrative, legal, and other appropriate remedies".² We are also mandated to "educate policymakers" on matters related to people with disabilities.³

¹ See ORS 192.517.

² See 42 U.S.C. § 15041 et seq; 42 U.S.C. § 10801 et seq.

³ See 42 U.S. Code § 15043(a)(2)(L).