

**CRIMINAL JUSTICE RESEARCH PROJECT  
AGREEMENT  
2008 - 2**

This agreement is by and between the Department of State Police, Identification Services Section, hereinafter referred to as **OSP** and the **OREGON DEPARTMENT OF HUMAN SERVICES, OFFICE OF MENTAL HEALTH AND ADDICTION SERVICES**, hereinafter referred to as **OMHAS**.

**PROJECT PURPOSE:**

The purpose of this project is to concretely track outcomes such as arrests that are important to **OMHAS** clients and stakeholders, to better understand the factors that affect the success of services and to assess outcomes associated with services. More specifically and as examples, this information will help **OMHAS** with two specific projects.

Under Senate Bill 267, passed during the 2003 Legislative Session, **OMHAS** is required to progressively increase the amount of funding that supports evidence based practices. The final goal is that 75% of all **OMHAS** services will be evidence based. Accessing information related to criminal offenses through **OSP** for clients will help establish the effectiveness of evidence based practices in decreasing arrests and re-arrests of clients (recidivism for adult and juvenile offenders) and to decrease the use of emergency mental health services.

The second part of the project is related to better understanding the demand on Oregon's state hospital services. The majority of services within the state hospital are delivered to clients that are civilly or criminally committed. The need for services related to forensic clients has increased over the past several years. **OMHAS** will use the results of this study to determine patterns of characteristics associated with these clients in an effort to better understand what is increasing the demand. It is suspected that the criminal history and the nature of the crimes could be a very important factor. In addition, the criminal history is also suspected to be strongly associated with factors related to length of stay and the eventual placement of the client in the community for continued care and monitoring.

In summary, **OMHAS** would like to propose matching all of their clients with **OSP** records and asks that **OSP** provide the criminal history available in the Computerized Criminal History (CCH) Files of all matched clients. For purposes of establishing a control group **OMHAS** would also like the criminal history of a set of un-matched individuals that have not used our services.

To accomplish the exchange, **OMHAS** is requesting that **OSP** supply identifying information for all individuals tracked within CCH. This information should include any system identification (State Identification Number), full name, gender, date of birth, and social security number, if available and permitted. **OMHAS** will match this information to its clients to create a matched set. Out of the non-matched records **OMHAS** will create a control group of similar CCH records. **OMHAS** will send both the matched and control IDs back to **OSP** without identifying which of these clients are matched vs. control. This will be done to protect health related information for the individual clients. **OSP** will provide criminal history records for this set of IDs out of the CCH and send it back to **OMHAS**. And as stated earlier, **OMHAS** would like to repeat this process annually with **OSP** to continually update **OMHAS** records.

**PROJECT SCOPE:**

The project scope, in accordance with Oregon Administrative Rules (OAR), Chapter 257, Rule 10-030, involves Oregon Criminal Record Information from the OSP, Identification Services Section, CCH Files, be provided to **OMHAS** by **OSP**. **OMHAS** will utilize the criminal record information as described under "Project Purpose".

**ACCESSING CCH FILES:**

Access to CCH Files by the **OMHAS** will be according to procedures and methods determined by **OSP**. Use of the "R" code will be required when accessing Criminal History information for this research project.

**FEE'S:**

**SECURITY AND PRIVACY:**

It is agreed by all parties that employees of the **OMHAS** will be screened to insure compliance with OAR 257-010-0025 and that it is the responsibility of the **OMHAS** to screen such employees. In addition, the **OMHAS** agrees that their personnel who review complete CCH information (documents containing a persons name and charge information) will complete a CJIS Security Background Check prior to reviewing the documents.

It is agreed by all parties that the benefits derived from such a research project can be reasonably anticipated to outweigh any potential harm to system security and individual privacy.

The **OMHAS** further agrees that criminal record information received from **OSP** will not be disseminated to any person or agency outside of this agreement where such dissemination identifies by name any person whose criminal record is reviewed during this project.

The **OMHAS** further agrees to destroy by burning or shredding criminal information when no longer needed for the purpose of this project.

{ The **OMHAS** further agrees that in the event that CCH data containing personal information, as described in ORS 646A.602, is lost, stolen, or otherwise breached while in the possession of the **OMHAS**, then the **OMHAS** will assume responsibility for the notification requirements under ORS646A.604. }

All parties further agree that criminal record information obtained from **OSP** during this project will not be used for any purpose other than that for which it was obtained as described under "Project Purpose".

**MONITORING:**

It is understood by all parties that **OSP** retains the right to monitor the project activities as described above and to terminate access to criminal record information if violation of OAR 257-010-0025 and/or 257-010-0030 is detected.

**PROJECT BEGINNING/TERMINATION:**

Access by the **OMHAS** to criminal record information through **OSP** will begin when this agreement is properly executed and the original information is returned to **OSP** and terminated one year from date of signed agreement or terminated as set out above under "Monitoring". The termination date of this agreement may be extended upon written agreement of all parties.

**OREGON STATE POLICE  
INFORMATION MANAGEMENT DIVISION  
IDENTIFICATION SERVICES SECTION**

OFFICIAL Patricia R. Whitfield

TITLE Director

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

**The Department of Human Services  
Addictions & Mental Health Division**

OFFICIAL Madeline M. Olson

TITLE Deputy Assistant Director

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

