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PERMANENT ADMINISTRATIVE ORDER

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CHAPTER 291

DEPARTMENT OF CORRECTIONS

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ARCHIVES DIVISION SECRETARY OF STATE & LEGISLATIVE COUNSEL

FILING CAPTION: MENTAL HEALTH SPECIAL HOUSING

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RULES:
291-048-0200, 291-048-0210, 291-048-0220, 291-048-0230, 291-048-0240, 291-048-0250, 291-048-0260, 291-048-0270, 291-048-0280, 291-048-0290, 291-048-0300, 291-048-0305, 291-048-0310, 291-048-0320, 291-048-0330

AMEND: 291-048-0200

RULE TITLE: Authority, Purpose and Policy

NOTICE FILED DATE: 05/26/2026

RULE SUMMARY: Amends rule to change the term "inmate" to "adult in custody"; clarify the rules; and align language more closely with therapeutic services.

RULE TEXT:
(1) Authority: The authority for these rules is granted to the Director of the Department of Corrections in accordance with ORS 179.040, 423.020, 423.030, and 423.075.
(2) Purpose: The purpose of these rules is to establish department policy and procedures for the assignment of adults in custody to mental health special housing who, because of a mental illness or intellectual disability, are unable to manage safely in general population settings.
(3) Policy: The department recognizes there are adults in custody with significant mental health issues. It is the policy of

the Department of Corrections to:
(a) Provide an environment focused on mental health treatment for adults in custody who, due to mental illness or intellectual disability, exhibit behaviors that pose a danger to themselves or others, or are unable to provide for their basic needs; and
(b) Implement practices within this environment to safely manage the high-risk adult in custody population, promoting conditions that support effective mental health treatment and behavioral therapy.

STATUTORY/OTHER AUTHORITY: ORS 179.040, 423.020, 423.030, 423.075

STATUTES/OTHER IMPLEMENTED: ORS 179.040, 423.020, 423.030, 423.075

AMEND: 291-048-0210

RULE TITLE: Definitions

NOTICE FILED DATE: 05/26/2026

RULE SUMMARY: Amends rule to change the term “inmate” to “adult in custody”; add, update, or clarify definitions to align more closely with therapeutic services or with department-adopted standard definitions; clarify the rules; and improve consistency within these rules and with other department rules.

RULE TEXT:
(1) Adult in Custody: Any person under the supervision of the Department of Corrections who is not on parole, probation, or post-prison supervision status.
(2) Behavioral Health Services: A Health Services unit with primary responsibility for the assessment and treatment of adults in custody with mental illness and intellectual disability.
(3) Behavioral Health Services Program Manager: The employee or designee who reports to the Behavioral Health Services administrator or designee and has responsibility for delivery of treatment services or coordination of program operations in a mental health special housing unit.
(4) Behavioral Health Unit: An intensive behavior therapy and skills training unit for adults in custody with a serious mental illness that have committed violent acts or engaged in significantly high-risk behavior.
(5) Facility: Any institution, facility, or staff office, including the grounds, operated by the Department of Corrections.
(6) Functional Unit: Any organizational component within the Department of Corrections responsible for the delivery of program services or coordination of program operations.
(7) Functional Unit Manager: Any person within the Department of Corrections who reports to either the Director, the Deputy Director, an Assistant Director, or an administrator and has responsibility for delivery of program services or coordination of program operations. In a correctional setting, the superintendent is the functional unit manager.
(8) Intermediate Care Housing: A mental health special housing unit that provides an in-patient level of care and treatment and a therapeutic environment for adults in custody.
(9) Mental Health Infirmary: A crisis response unit that provides acute mental health care and a therapeutic environment for adults in custody.
(10) Mental Health Special Housing: A housing assignment separate from the general population including facilities, rooms, or cells based on the admission criteria for each specific unit. Mental health special housing includes Mental Health Infirmaries, Intermediate Care Housing, and Behavioral Health Units.
(11) Mental Health Special Housing Custody Manager: The employee or designee responsible for security operations in a mental health special housing unit and for making operational decisions in accordance with rule, policy, or procedure, who is appointed by the institution’s functional unit manager.
(12) Mental Health Treatment Team: A team that may consist of the Behavioral Health Services program manager(s), psychiatrist or nurse practitioner, nurse, qualified mental health professionals and associates, psychologists, mental health special housing custody manager, represented security employees, and other designated employees. The purpose of this group is to:
(a) Assess the mental status of adults in custody assigned to a mental health special housing unit;
(b) Establish and update individualized treatment plans;
(c) Conduct meaningful reviews at a minimum of once every 30 days; and
(d) Coordinate discharge and mental health follow-up.
(13) Prescribing Practitioner: A licensed psychiatrist or psychiatric mental health nurse practitioner.
(14) Qualified Mental Health Associate: Any person who has been credentialed and has the responsibility for the delivery of mental health treatment services within the scope of certification.
(15) Qualified Mental Health Professional: Any person who has been credentialed and has the responsibility for the delivery of mental health assessment and treatment services within the scope of certification.

(16) Reasonable Grounds: Information that is of such credibility that it would induce a reasonably prudent person to use it in the conduct of their affairs.
(17) Serious Mental Illness: Any current or recent (within the preceding 6 months) diagnosis of: other specified schizophrenia and psychotic disorders, unspecified schizophrenia and psychotic disorders, schizophrenia, bipolar I disorder, bipolar II disorder or other specified bipolar disorder, unspecified bipolar disorder, schizoaffective disorder, schizophreniform disorder, major depressive disorder (single episode or recurrent), brief psychotic disorder, psychotic disorder due to medical condition, or major neurocognitive disorder unless the treatment record clearly indicates that symptoms of the disorder(s) are (have been) in partial remission (with or without treatment); an IQ of 69 or below, with adaptive skills deficit; engagement in a recent (within the preceding year) serious suicide attempt; or any diagnosed mental disorder (excluding any disorder manifested solely by repeated criminal or otherwise antisocial conduct, substance use or induced disorders, and paraphilias) currently associated with significant impairment in cognitive, behavioral or emotional functioning that substantially interferes in a person's ability to function on a daily basis and that has a seriously adverse effect on life or on mental or physical health.
(18) Special Population Management Committee: A committee composed of at least three department employees, including a representative from institution operations, Behavioral Health Services, and the Office of Population Management.

STATUTORY/OTHER AUTHORITY: ORS 179.040, 423.020, 423.030, 423.075

STATUTES/OTHER IMPLEMENTED: ORS 179.040, 423.020, 423.030, 423.075

AMEND: 291-048-0220

RULE TITLE: Selection and Training of Security Employees for Mental Health Special Housing

NOTICE FILED DATE: 05/26/2026

RULE SUMMARY: Amends rule to change the term “inmate” to “adult in custody”; update to current department terminology; and clarify the rules.

RULE TEXT:
(1) Selection Criteria: For positions that are solely assigned to mental health special housing:
(a) Security employees must have successfully completed trial service;
(b) All employees requesting to work in mental health special housing will be reviewed and must receive a satisfactory appraisal by a committee designated by the institution’s functional unit manager before assignment to the unit. At a minimum, the employee must meet the following criteria:
(A) Have expressed a constructive interest in working with adults in custody in mental health special housing;
(B) Have demonstrated the ability to work with adults in custody through conflict-reducing and conflict-control skills; and
(C) Have demonstrated the ability to use good judgment.
(2) Position Availability: Decisions regarding the number of mental health special housing positions will be made by the institution’s functional unit manager and will be reviewed as needed.
(3) Mental Health Special Housing Position Rotations: Rotation of employees may occur in the best interest or wellbeing of the employee or the operation of the unit, upon determination by a committee designated by the institution’s functional unit manager.
(4) Training of Assigned Personnel: All employees assigned to work in a mental health special housing unit are required to annually complete a minimum number of 12 training hours specific to mental health special housing, in addition to any other department training requirements.

STATUTORY/OTHER AUTHORITY: ORS 179.040, 423.020, 423.030, 423.075

STATUTES/OTHER IMPLEMENTED: ORS 179.040, 423.020, 423.030, 423.075

AMEND: 291-048-0230

RULE TITLE: Evaluation Criteria for Admission to Mental Health Special Housing

NOTICE FILED DATE: 05/26/2026

RULE SUMMARY: Amends rule to change the term “inmate” to “adult in custody”; clarify the rules; remove gendered language; align these rules with current process; and align rule language more closely with therapeutic services.

RULE TEXT:
An adult in custody that, in the judgment of Behavioral Health Services, meets one or more of the following conditions because of a mental illness should be considered for admission to mental health special housing:
(1) A danger to others;
(2) A danger to self;
(3) Unable to care for their own basic needs;
(4) Significant functional impairment; or
(5) Needs a diagnostic evaluation or medication adjustment.

STATUTORY/OTHER AUTHORITY: ORS 179.040, 423.020, 423.030, 423.075

STATUTES/OTHER IMPLEMENTED: ORS 179.040, 423.020, 423.030, 423.075

AMEND: 291-048-0240

RULE TITLE: Assignment to Mental Health Special Housing

NOTICE FILED DATE: 05/26/2026

RULE SUMMARY: Amends rule to change the term “inmate” to “adult in custody”; clarify the rules; and align the rules more closely with therapeutic services.

RULE TEXT:
(1) An adult in custody will be assigned to a mental health special housing unit based on the least restrictive environment that satisfies the needed level of care.
(2) Mental health special housing includes Mental Health Infirmaries, Intermediate Care Housing, and the Behavioral Health Units. The assignment process varies dependent on the specific unit.
(a) Assignment to a Mental Health Infirmary will be made in accordance with OAR 291-048-0250 to 0260.
(b) Assignment to Intermediate Care Housing will be made in accordance with OAR 291-048-0270.
(c) Assignment to a Behavioral Health Unit will be made in accordance with OAR 291-048-0280.
(3) Once an adult in custody has been assigned to a mental health special housing unit, the individual may be assigned to other mental health special housing units for treatment as deemed necessary or advisable by the mental health treatment team. However, an individual may only be assigned to a Mental Health Infirmary by order of the prescribing practitioner.

STATUTORY/OTHER AUTHORITY: ORS 179.040, 423.020, 423.030, 423.075

STATUTES/OTHER IMPLEMENTED: ORS 179.040, 423.020, 423.030, 423.075

AMEND: 291-048-0250

RULE TITLE: Voluntary Assignment to a Mental Health Infirmary

NOTICE FILED DATE: 05/26/2026

RULE SUMMARY: Amends rule to change the term “inmate” to “adult in custody”; clarify the rules; and align these rules with current process and more closely with therapeutic services.

RULE TEXT:
(1) An adult in custody may be voluntarily placed in a Mental Health Infirmary when:
(a) There is a referral from an institution qualified mental health professional;
(b) The Mental Health Infirmary mental health treatment team finds that the adult in custody needs mental health treatment;
(c) There is reasonable likelihood that treatment can be accomplished in a Mental Health Infirmary; and
(d) The adult in custody consents to admission in writing.
(2) The Mental Health Infirmary prescribing practitioner shall make the final decision whether an adult in custody is admitted to a Mental Health Infirmary for treatment.

STATUTORY/OTHER AUTHORITY: ORS 179.040, 423.020, 423.030, 423.075

STATUTES/OTHER IMPLEMENTED: ORS 179.040, 423.020, 423.030, 423.075

AMEND: 291-048-0260

RULE TITLE: Involuntary Assignment to a Mental Health Infirmary

NOTICE FILED DATE: 05/26/2026

RULE SUMMARY: Amends the rule to change the term “inmate” to “adult in custody”; clarify the rules; align the rules more closely with therapeutic services; update or further define process; remove gendered language; remove language for non-emergency involuntary assignment to a mental health infirmary because the language was duplicative.

RULE TEXT:
(1) An adult in custody may be involuntarily assigned to a Mental Health Infirmary for evaluation for a period not to exceed five working days, by approval of the Behavioral Health Services program manager, prescribing practitioner, or Behavioral Health Services administrator for the Mental Health Infirmary or designee, only upon a finding of reasonable grounds.
(2) Assessment: Within five working days following assignment to a Mental Health Infirmary, the mental health treatment team will assess the need for treatment. The following mental health information shall be considered by the prescribing practitioner in making the assessment:
(a) Mental health diagnoses;
(b) Potential therapeutic effect of a change in environment;
(c) Potential for development of an individualized treatment plan for the adult in custody that is available within a Mental Health Infirmary and is likely to benefit the adult in custody;
(d) Ability to function in the general population; and
(e) Any other factors substantially related to the mental health of the adult in custody, as applicable, including observations made by employees, individual diagnostic interviews, and tests assessing intellect and coping abilities.
(3) Upon completion of the assessment and compilation of the adult in custody's mental health history:
(a) If the mental health treatment team determines the adult in custody is not in need of the level of care in a Mental Health Infirmary, the adult in custody will be returned to their former status or referred to mental health treatment, as appropriate.
(b) If the mental health treatment team determines the adult in custody needs the level of care in a Mental Health Infirmary, an individualized treatment plan will be developed.
(4) The adult in custody will be given the opportunity to voluntarily admit to a Mental Health Infirmary.
(5) If the adult in custody is unwilling to be voluntarily admitted, the prescribing practitioner may admit the adult in custody on an involuntary basis.
(a) The prescribing practitioner will deliver notice of Emergency/Involuntary Assignment to Mental Health Special Housing (CD1567) to the institution’s functional unit manager.
(b) The institution’s functional unit manager will notify the Hearings Officer of the involuntary assignment.
(c) The Hearings Officer will arrange to conduct an involuntary assignment hearing as outlined in OAR 291-048-0290 within five working days or as soon as practicable after completion of the evaluation.
(6) Recommended Length of Stay: In all instances where involuntary assignment is recommended, the prescribing practitioner will include a recommendation for the length of stay in a Mental Health Infirmary, not to exceed 180 days.

STATUTORY/OTHER AUTHORITY: ORS 179.040, 423.020, 423.030, 423.075

STATUTES/OTHER IMPLEMENTED: ORS 179.040, 423.020, 423.030, 423.075

AMEND: 291-048-0270

RULE TITLE: Assignment to Intermediate Care Housing

NOTICE FILED DATE: 05/26/2026

RULE SUMMARY: Amends rule to change the term "inmate" to "adult in custody"; clarify the rules; update or further define process; remove gendered language; and align language more closely with therapeutic services.

RULE TEXT:
(1) An adult in custody may be assigned to Intermediate Care Housing based on a referral from a qualified mental health professional. An adult in custody may be referred if:
(a) It is determined at release from a Mental Health Infirmary that the adult in custody requires additional stabilization prior to placement into a less restrictive environment;
(b) It is determined at release from a Behavioral Health Unit that the adult in custody requires additional stabilization prior to placement into a less restrictive environment;
(c) It is determined at intake that the adult in custody does not have the basic coping skills to be placed directly into a less restrictive environment;
(d) It is determined during the adult in custody's incarceration that there will be an increase in symptoms in a less restrictive environment if the adult in custody is not provided a higher level of treatment and support; or
(e) The adult in custody demonstrates high risk for suicide or frequent self-directed violence.
(2) An adult in custody may be admitted in Intermediate Care Housing when:
(a) The Intermediate Care Housing mental health treatment team finds that the adult in custody needs mental health treatment; and
(b) There is a reasonable likelihood that treatment can be accomplished in Intermediate Care Housing.
(3) The Behavioral Health Services program manager for Intermediate Care Housing shall make the final decision whether an adult in custody is admitted to Intermediate Care Housing for treatment.
(4) Assessment: Within five working days following assignment to Intermediate Care Housing, the mental health treatment team will assess the need for treatment. The following mental health information shall be considered by the Behavioral Health Services program manager for Intermediate Care Housing in making the assessment:
(a) Mental health diagnoses;
(b) Potential therapeutic effect of a change in environment;
(c) Potential for development of an individualized treatment plan for the adult in custody that is available within Intermediate Care Housing and is likely to benefit the adult in custody;
(d) Ability to function in the general population; and
(e) Any other factors substantially related to the mental health of the adult in custody, as applicable, including observations made by employees, individual diagnostic interviews, and tests assessing intellect and coping abilities.
(5) Upon completion of the assessment and compilation of the adult in custody's mental health history:
(a) If the mental health treatment team determines the adult in custody is not in need of the level of care in Intermediate Care Housing, the adult in custody will be returned to their former status or referred to mental health treatment, as appropriate.
(b) If the mental health treatment team determines the adult in custody needs the level of care in Intermediate Care Housing, an individualized treatment plan will be developed.
(c) The adult in custody will be given the opportunity to voluntarily admit to Intermediate Care Housing.
(d) If the adult in custody is unwilling to be voluntarily admitted, the Behavioral Health Services program manager may admit the adult in custody on an involuntary basis:
(A) If the adult in custody has previously been assigned to a mental health special housing unit on an involuntary basis within the last 180 days, the adult in custody may be assigned to Intermediate Care Housing without any further action.
(B) If the adult in custody has not previously been assigned to a mental health special housing unit on an involuntary

basis, the Behavioral Health Services program manager will deliver notice of Emergency/Involuntary Assignment to Mental Health Special Housing (CD1567) to the institution's functional unit manager.
(C) The institution's functional unit manager will notify the Hearings Officer.
(D) The Hearings Officer will arrange to conduct an involuntary assignment hearing as outlined in OAR 291-048-0290 within five working days, or as soon as practicable, after completion of the assessment.

STATUTORY/OTHER AUTHORITY: ORS 179.040, 423.020, 423.030, 423.075

STATUTES/OTHER IMPLEMENTED: ORS 179.040, 423.020, 423.030, 423.075

AMEND: 291-048-0280

RULE TITLE: Assignment to a Behavioral Health Unit

NOTICE FILED DATE: 05/26/2026

RULE SUMMARY: Amends rule to change the term "inmate" to "adult in custody"; update or further define process or align these rules with current process; clarify the rules; update language to align more closely with therapeutic services; and remove gendered language.

RULE TEXT:
(1) An adult in custody may be assigned to a Behavioral Health Unit:
(a) If the individual is diagnosed with a serious mental illness and is being considered for placement in an Intensive Management Unit in accordance with the department's rules on Intensive Management Unit (OAR 291-055) or for placement in an Administrative Segregation Unit in accordance with the department's rules on Segregation (Administrative) (OAR 291-046); and
(b) The Special Population Management Committee recommends assignment to a Behavioral Health Unit.
(2) An adult in custody may be placed in a Behavioral Health Unit when:
(a) There is a referral from a qualified mental health professional;
(b) The Behavioral Health Unit treatment team reviews the referral; and
(c) There is a reasonable likelihood that treatment can be accomplished in a Behavioral Health Unit.
(3) The Behavioral Health Services program manager for the Behavioral Health Unit shall make the final decision whether an adult in custody is admitted to a Behavioral Health Unit for treatment.
(4) Assessment: Within five working days following assignment to a Behavioral Health Unit, the Behavioral Health Unit treatment team will assess the need for treatment. The following mental health data shall be considered:
(a) Mental health diagnoses;
(b) Potential therapeutic effect of a change in environment;
(c) Potential for development of an individualized treatment plan for the adult in custody that is available within a Behavioral Health Unit and is likely to benefit the adult in custody; and
(d) Any other factors substantially related to the mental health of the adult in custody, as applicable, including observations made by employees, individual diagnostic interviews, and tests assessing intellect and coping abilities.
(5) Upon completion of the assessment and compilation of the adult in custody's mental health history:
(a) If the Behavioral Health Unit treatment team determines the adult in custody is not in need of the level of care in a Behavioral Health Unit, the adult in custody will be returned to their former status, assigned to an Intensive Management Unit, to Administrative Segregation, or placed as appropriate.
(b) If the Behavioral Health Unit treatment team determines the adult in custody needs the level of care in a Behavioral Health Unit, an individualized treatment plan will be developed.
(c) The adult in custody will be given the opportunity to voluntarily admit to a Behavioral Health Unit.
(d) If the adult in custody is unwilling to be voluntarily admitted, the Behavioral Health Services program manager for the Behavioral Health Unit may admit the adult in custody on an involuntary basis.
(A) If the adult in custody has previously been assigned to a mental health special housing unit on an involuntary basis within the last 180 days, the adult in custody may be assigned to a Behavioral Health Unit without any further action.
(B) If the adult in custody has not previously been assigned to a mental health special housing unit on an involuntary basis, the Behavioral Health Services program manager for the Behavioral Health Unit will deliver notice of Emergency/Involuntary Assignment to Mental Health Special Housing (CD1567) to the institution's functional unit manager.
(C) The institution's functional unit manager will notify the Hearings Officer.
(D) The Hearings Officer will arrange to conduct an involuntary assignment hearing as outlined in OAR 291-048-0290 within five working days after completion of the assessment.

STATUTORY/OTHER AUTHORITY: ORS 179.040, 423.020, 423.030, 423.075

STATUTES/OTHER IMPLEMENTED: ORS 179.040, 423.020, 423.030, 423.075

AMEND: 291-048-0290

RULE TITLE: Involuntary Assignment to Mental Health Special Housing

NOTICE FILED DATE: 05/26/2026

RULE SUMMARY: Amends rule to change the term "inmate" to "adult in custody"; clarify the rules; update or further define process; remove gendered language; improve consistency with other department rules; and update language to align more closely with therapeutic services. Some text proposed for deletion from OAR 291-048-0290(7) was restored.

RULE TEXT:
(1) Notice of Hearing and Rights:
(a) The adult in custody shall be given written notice of the hearing not less than 24 hours prior to the hearing.
(b) The notice shall include a statement of the adult in custody's rights with respect to the hearing.
(2) The hearing shall be conducted by a Hearings Officer or other person trained in the hearings process in the event the Hearings Officer is unavailable.
(3) The Hearings Officer shall not have participated in any way in the assessment process determining assignment to a Behavioral Health Unit.
(4) The Hearings Officer may pose questions during the hearing.
(5) Representation:
(a) In all cases, the adult in custody is entitled to:
(A) Speak on their own behalf; and
(B) Be present at all stages of the hearing process, except when the Hearings Officer finds that to have the adult in custody present would create an immediate threat to facility security or safety of its employees or others. The reason(s) for the finding shall be a part of record.
(b) Assistance by an employee, other adult in custody, or other person approved by the Hearings Officer will be ordered for those individuals where it is found that assistance is necessary based upon a visual, speech, or hearing disability, language barriers, or competence and capacity of the adult in custody.
(6) Investigation: The adult in custody has a right to request that an investigation be conducted. If an investigation is ordered, a designee of the Hearings Officer shall conduct the investigation. No person shall serve as an investigator who has participated in any previous way in the process of an involuntary placement of the specific adult in custody into mental health special housing.
(a) An investigation shall be conducted upon request by the adult in custody if an investigation will assist in the resolution of the proceedings and the information sought is within the ability of the facility to procure or the adult in custody to provide with their own resources.
(b) The Hearings Officer may order an investigation on the Hearings Officer’s own motion.
(c) The Hearings Officer shall allow the adult in custody access to the results of the investigation unless disclosure of the investigative results would constitute a threat to the safety and security of the facility, its employees, or others.
(7) Witnesses: Adults in custody have the right to call witnesses to testify before the Hearings Officer. Witnesses may include other adults in custody, employees, or other persons.
(a) If witnesses will be called, the adult in custody, prior to the hearing, must develop a list of witnesses and questions to be posed to each witness. The adult in custody shall bring the list of questions and the list of witnesses to the hearing.
(b) The adult in custody or the adult in custody’s representative shall not have the right to cross-examine or directly pose questions to any witness.
(c) The Hearings Officer may exclude a specific adult in custody witness or employee witness upon finding that the witness' testimony presents an undue hazard to facility security or the safety of its employees or others or would not assist in the resolution of the proceeding. The reason(s) for the exclusion of a witness shall be made a part of the record.
(d) The Hearings Officer may exclude other persons as witnesses upon finding that their testifying presents an undue hazard to facility security or the safety of its employees or others or would not assist in the resolution of the proceeding,

or the witness is not reasonably available. The reason(s) for the exclusion of a witness shall be made a part of the record.
(e) An adult in custody witness shall have the right to refuse to testify.
(f) Persons other than adults in custody or employees requested as witnesses shall have the right to refuse to appear or testify.
(g) The Hearings Officer may, on the Hearings Officer's own motion, call witnesses to testify.
(h) All questions which will assist in the resolution of the proceedings, as determined by the Hearings Officer, shall be posed. The reason(s) for not posing a question will be made a part of the record.
(8) Documentation or Reports:
(a) Adults in custody shall have the right to present documents or reports during the hearing.
(b) Any reporting employees, or other agents of the facility who are knowledgeable, shall submit documents or reports in advance of the hearing.
(c) The Hearings Officer may exclude documents or reports, making a finding that such would be unduly hazardous to facility security or the safety of its employees or others, or would not assist in the resolution of the proceeding. The reason(s) for the exclusion of documents or reports shall be made a part of the record.
(d) The Hearings Officer may classify documents or reports as confidential upon making a finding that revealing such would constitute a threat to the safety and security of the facility or violate statutory provisions regarding confidentiality. The reason(s) for classifying documents or reports as confidential shall be made a part of the record.
(9) Postponement:
(a) A hearing may be postponed by the Hearings Officer for "good cause" and for a reasonable period of time.
(b) "Good cause" includes, but is not limited to:
(A) Illness or unavailability of the adult in custody;
(B) Gathering of additional evidence; or
(C) Gathering of additional documentation.
(c) The reason(s) for the postponement shall be made a part of the record.
(10) At the conclusion of the hearing, the Hearings Officer will deliberate and determine whether the information supports placement of the adult in custody in mental health special housing, considering any contrary information submitted by the individual. The Hearings Officer may postpone the rendering of a decision for a reasonable period of time for the purpose of reviewing the information.
(a) No Justification: The Hearings Officer may find that the information does not support placement in mental health special housing, in which case the Hearings Officer will recommend that the adult in custody return to the adult in custody's former status with all rights and privileges of that status.
(b) Justification: The Hearings Officer may find the report does support placement in mental health special housing, in which case the Hearings Officer will so inform the adult in custody and recommend the individual be assigned to mental health special housing for a specified period of time, as recommended by the prescribing practitioner or mental health treatment team, not to exceed 180 days.
(11) Hearing Record:
(a) Upon completion of a hearing, the Hearings Officer shall prepare a hearing record within 10 days following the conclusion of the hearing.
(b) The record of the formal hearing shall include:
(A) Notice of Emergency/Involuntary Assignment to the Mental Health Special Housing (CD 1567);
(B) Notice of Hearing and Rights;
(C) Recording of hearing;
(D) Supporting material(s); and
(E) Findings of Fact, Conclusion, and Recommendation of the Hearings Officer.
(c) The Hearings Officer will retain the recording and forward to the Behavioral Health Services administrator items (A), (B), (D), and (E) of this section.

STATUTORY/OTHER AUTHORITY: ORS 179.040, 423.020, 423.030, 423.075

STATUTES/OTHER IMPLEMENTED: ORS 179.040, 423.020, 423.030, 423.075

AMEND: 291-048-0300

RULE TITLE: Administrative Review

NOTICE FILED DATE: 05/26/2026

RULE SUMMARY: Amends rule to change the term "inmate" to "adult in custody"; make grammatical edits or minor corrections; and clarify the rules.

RULE TEXT:
(1) The Behavioral Health Services administrator or designee shall review the results of any hearing held to involuntarily place an adult in custody in mental health special housing.
(2) The Behavioral Health Services administrator or designee shall review the Findings of Fact, Conclusion, and Recommendation of the Hearings Officer to determine whether:
(a) There was substantial compliance with the procedural requirements of these rules;
(b) The recommended decision was based on substantial information; and
(c) The recommended decision was proportionate to the information and consistent with the provisions of the rule.
(3) Within five days of the receipt of the Hearings Officer's report, the Behavioral Health Services administrator or designee shall enter an order to:
(a) Affirm the Hearings Officer’s recommended decision;
(b) Modify the Hearings Officer’s recommended decision; or
(c) Reverse the Hearings Officer’s recommended decision.
(4) If the Behavioral Health Services administrator or designee modifies or reverses the Hearings Officer’s recommended decision, the Behavioral Health Services administrator or designee must state the reason(s) in writing and promptly notify the adult in custody, Hearings Officer, mental health treatment team, and institution’s functional unit manager of the action and reason.
(5) A copy of the order shall be returned to the Hearings Officer and the adult in custody.

STATUTORY/OTHER AUTHORITY: ORS 179.040, 423.020, 423.030, 423.075

STATUTES/OTHER IMPLEMENTED: ORS 179.040, 423.020, 423.030, 423.075

ADOPT: 291-048-0305

RULE TITLE: Programming Levels in a Behavioral Health Unit

NOTICE FILED DATE: 05/26/2026

RULE SUMMARY: Adopts rule to establish guidelines for managing movement and supervision of adults in custody within Behavioral Health Units.

RULE TEXT:
(1) Adults in custody assigned to a Behavioral Health Unit will be permitted to leave their cell for visits; exercise; recreational activities; showers; medical, dental, or mental health services; hearings; interviews; or other reasons, as authorized by the Behavioral Health Services program manager for the Behavioral Health Unit, as appropriate based on the adult in custody's risk to others, the adult in custody's individualized treatment plan, and the adult in custody's individual progress within the program.
(2) The Assistant Superintendent of Security will assign escort supervision, as deemed appropriate.

STATUTORY/OTHER AUTHORITY: ORS 179.040, 423.020, 423.030, 423.075

STATUTES/OTHER IMPLEMENTED: ORS 179.040, 423.020, 423.030, 423.075

AMEND: 291-048-0310

RULE TITLE: Provision of Basic Services and Programs in Mental Health Special Housing

NOTICE FILED DATE: 05/26/2026

RULE SUMMARY: Amends rule to change the term "inmate" to "adult in custody"; improve consistency within these rules or with other department rules; clarify the rules; update or further define process or align these rules with current process; update language to align more closely with therapeutic services; and remove gendered language.

RULE TEXT:
(1) Mental health special housing shall be under the clinical supervision of the Behavioral Health Services program manager and the operational supervision of the mental health special housing custody manager.
(2) An adult in custody in mental health special housing may be given special security housing upon recommendation of the mental health treatment team for a specified period of time and may not be permitted out of their assigned cell or room except when in the actual custody of a security employee.
(3) Basic services and programs shall be determined by the mental health treatment team. The way services and programs are provided may differ from the way they are provided to adults in custody in general population, if providing them in a routine manner would cause an immediate and continuing threat to the security of the facility or the safety of its employee or others.
(4) The mental health treatment team will develop, implement, and review the individualized treatment plans.
(a) The individualized treatment plan will have a specific set of objectives to meet in a progression of increasing personal responsibility. The individualized treatment plan must be written and a copy given to each adult in custody with whom the individualized treatment plan is developed. A meaningful review of individualized treatment plans will occur every 30 days.
(b) An individualized treatment plan may include, but is not limited to, a structured daily schedule based on that adult in custody's individual needs, an adult in custody's progression in a level system, and any specialized interventions, or provisions recommended for that adult in custody by the mental health treatment team.
(5) A mental health special housing employee may temporarily withhold a basic service previously approved to an adult in custody in mental health special housing if the mental health special housing employee has sufficient reason to believe the security of the facility, its employees, or others is in immediate danger.
(a) The mental health special housing custody manager shall be informed as soon as is reasonable of any service or program that is withheld.
(b) All such actions directly affecting an adult in custody's individualized treatment must be reported to the Behavioral Health Services program manager for the mental health special housing unit by the following workday.
(c) The mental health treatment team must review any basic service or program that is withheld continuously.
(6) Psychiatric treatment or any type of psychotropic drugs administered to an adult in custody assigned to mental health special housing shall be in accordance with the department's rules on Informed Consent to Treatment (OAR 291-064).
(7) All psychotropic medication administered to adults in custody housed in mental health special housing shall be prescribed by a prescribing practitioner. All prescribed medication shall be administered by a nurse licensed to administer medication.
(8) Personal Property: Items permitted will, in general, be in accordance with the adult in custody's individualized treatment plan, the adult in custody's individual progress within a treatment program, and the department's rules on Personal Property (Inmate) (OAR 291-117). Property in addition to items permitted shall be approved by the mental health treatment team. Personal property items may be withheld for security and treatment purposes, as determined by the mental health treatment team.
(9) Visits: An adult in custody in mental health special housing will be permitted visits in accordance with the adult in custody's individualized treatment plan, the adult in custody's individual progress within a treatment program, and the department's rules on visiting adults in custody assigned to the Mental Health Infirmary, OAR 291-127-0260(9).

(10) Recreation: An adult in custody will have an opportunity to participate in recreational activities in accordance with the adult in custody's individualized treatment plan, the adult in custody's individual progress within a treatment program, the adult in custody's risk to others and the operational needs of the unit.
(11) The management of an adult in custody placed in therapeutic restraints for medical or mental health treatment shall be in accordance with the department's rules on Therapeutic Restraints (Use of) (OAR 291-071).
(12) Suicide or Crisis:
(a) An adult in custody assigned to mental health special housing with suicidal ideation, or attempt, may be placed on suicide precaution.
(b) The adult in custody will maintain this status until the assigned qualified mental health professional determines that the suicide precaution is no longer necessary, in accordance with the department's rules on Suicide Prevention in Correctional Facilities (OAR 291-076).

STATUTORY/OTHER AUTHORITY: ORS 179.040, 423.020, 423.030, 423.075

STATUTES/OTHER IMPLEMENTED: ORS 179.040, 423.020, 423.030, 423.075

AMEND: 291-048-0320

RULE TITLE: Release From Mental Health Special Housing

NOTICE FILED DATE: 05/26/2026

RULE SUMMARY: Amends rule to change the term "inmate" to "adult in custody"; and remove unnecessary language.

RULE TEXT:
(1) Upon petition by an adult in custody, an adult in custody assigned to mental health special housing on a voluntary basis will be reassigned to a less restrictive environment within five working days, unless the mental health treatment team determines continued treatment at the current level of care is necessary. In such instances, the mental health treatment team shall follow the procedures for involuntary assignment outlined in OAR 291-048-0290.
(2) An adult in custody assigned involuntarily to mental health special housing will remain so assigned for only the shortest length of time necessary to achieve the purpose(s) for which the assignment was prescribed. The assignment shall not exceed 180 days unless the assignment is renewed in a subsequent administrative hearing as outlined in OAR 291-048-0290.
(3) When an adult in custody is released from mental health special housing, the mental health treatment team, in collaboration with the Office of Population Management, will determine the appropriate housing assignment.

STATUTORY/OTHER AUTHORITY: ORS 179.040, 423.020, 423.030, 423.075

STATUTES/OTHER IMPLEMENTED: ORS 179.040, 423.020, 423.030, 423.075

AMEND: 291-048-0330

RULE TITLE: Administrative Hold Assignments

NOTICE FILED DATE: 05/26/2026

RULE SUMMARY: Amends rule to change the term "inmate" to "adult in custody"; clarify the rules; remove gendered language; and update or further define process or align these rules with current process.

RULE TEXT:
(1) The institution’s functional unit manager may temporarily assign an adult in custody to mental health special housing on administrative hold status for other than mental health reasons if the institution’s functional unit manager determines that the adult in custody’s assignment is necessary or advisable to protect the safety, security, order, and efficient operations of the facility, the safety or security of its employees, visitors or other adults in custody, or to further other legitimate correctional objectives.
(2) Assignment to mental health special housing on administrative hold status shall not be an admission to the unit. An adult in custody assigned to mental health special housing on administrative hold status may be subject to all operational policies and procedures while assigned to the unit.
(3) An adult in custody may be involuntarily assigned to mental health special housing for a period more than 30 days in accordance with the notice and hearings process set forth in the department's rules on Administrative Housing (OAR 291-046).

STATUTORY/OTHER AUTHORITY: ORS 179.040, 423.020, 423.030, 423.075

STATUTES/OTHER IMPLEMENTED: ORS 179.040, 423.020, 423.030, 423.075