

**Other formats and languages**

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact Behavioral Health Division Business Office at [behavioralhealth.businessoffice@oha.oregon.gov](mailto:behavioralhealth.businessoffice@oha.oregon.gov) or 971.208.1471 (voice/text). We accept all relay calls.

## Memorandum

**To:** Adult Mental Health Residential Treatment Providers (RTF, RTH, SRTF) and Community Mental Health Programs (CMHPs)

**From:** Christa Jones, Psy.D., Deputy Director, Service Delivery and Jon Collins, Ph.D., Deputy Director, Operations and Strategy

**Date:** May 15, 2026

**Subject:** Update on Emergency Rules and Future Rulemaking

---

## Purpose

This memo notifies providers of Residential Treatment Homes (RTH), Residential Treatment Facilities (RTF) and Secure Residential Treatment Facilities (SRTF), and Community Health Programs (CMHP) of three emergency rule changes, effective immediately, that address safety, timeliness, and service prioritization in Oregon's adult mental health residential treatment system. These updates reflect ongoing conversations with residential treatment providers about challenges in the current treatment environment. This memo also previews additional related rule changes under development.

# Rules Updates

Relating to weapons, OAR Chapter 309, Division 35 will be amended to read:

**(98) “Weapon” means:**

- (a) A firearm;
- (b) Any dirk, dagger, ice pick, slingshot, metal knuckles or similar instrument, or knife, except kitchen knives, the use of which could inflict injury upon a person or property;
- (c) Mace, tear gas, pepper mace or any similar deleterious agent as defined in ORS 163.211;
- (d) An electrical stun gun or any similar instrument;
- (e) A tear gas weapon as defined in ORS 163.211;
- (f) A club, bat, baton, billy club, bludgeon, knobkerrie, nunchucks, nightstick, truncheon or any similar instrument, the use of which could inflict injury upon a person or property; or
- (g) A dangerous or deadly weapon as those terms are defined in ORS 161.015.

All programs will be required to have locked storage for all kitchen knives.

All programs will be required to have policies and procedures prohibiting weapons, using this definition, including when the program has the right to search a resident’s belongings or person under a reasonable cause standard.

Relating to variances to prioritization criteria, OAR Chapter 309, Division 35 will be amended to read:

**(15) A provider seeking a variance to the waitlist prioritization rules must submit a written request to the Division that clearly outlines the individual for whom the variance is being requested:**

- (a) Is currently in a community hospital:
  - (A) No longer requires hospital level of care;
  - (B) Is stable and has had no incidents of crisis in the last 30 days;
  - (C) Has been in the hospital 180 days or more; and
  - (D) Has been on the facility waitlist 120 days or more.
- (b) Has been issued a 30-day notice of involuntary transfer or discharge that:
  - (A) Clearly demonstrates the specific needs that can only be met in a higher level of care; and
  - (B) Includes a new assessment by the IQA demonstrating SRTF level of care is medically necessary.
- (c) Has been issued a 30-day notice of involuntary transfer or discharge due to facility closure with a specific facility closure date.

**Relating to OHA review of notices of involuntary transfers and discharges, OAR Chapter 309, Division 35 will be amended to read:**

OHA originally installed 309-035-0170(3) to ensure that providers met legal sufficiency for involuntary discharge notices.

OHA will pause agency approval of involuntary notices for 6 months; OHA will monitor impacts and consider permanent rulemaking pending outcomes of the pause.

OHA will continue to provide technical assistance to providers who would like assistance ensuring notices meet legal sufficiency.

## **Scope of Next Round of Rulemaking**

OHA is currently developing emergency rules to implement 2026 legislation. Following that, and as part of the permanent rulemaking process, OHA will also focus on the following other areas based on public comments and other sources:

- 309-035-0105: Definition of Class II SRTF and Physical Interventions
- 309-035-0125: Administrative Management
- 309-035-0156: Grounds for Denial of Admission
- 309-035-0159: Admissions Priority Waitlist

The intended date for these changes is January 1, 2027.

## **Admissions Priority Waitlist Approach**

OHA is committed to working collaboratively with external partners to develop alternative approaches to the current adult mental health admissions prioritization requirements.

As part of our standard process, OHA will hold feedback sessions with a broad range of external partners, including: individuals with lived and living experience; family members and caregivers; consumer advocacy groups; the Office of the Residential Ombuds; residential providers; community organizations and providers, including culturally-specific providers; community mental health programs; hospitals; coordinated care organizations; the Nine Federally Recognized Tribes in Oregon; and other interested parties.

These sessions will tentatively be held in October and November of 2026 and will inform permanent changes to the prioritization rules.

OHA will also be issuing an FAQ to address operational details tied to the emergency rules. Additional information will be shared in July 2026.