

Commitment to Change Workgroup

NOVEMBER 17, 2023



Agenda



- Welcome (Media & Recording Reminder)
- Equity in the civil commitment system
- Decision-making processes for developing recommendations

Workgroup Membership

Oregon Tribes – Angie Butler

Mothers of the Mentally Ill – Jerri Clark

Oregon Health Authority – **Ben Teese** for Zach Thornhill

Oregon State Hospital – Dr. Katherine Tacker

Oregon Department of Human Services – Chelas Kronenberg

Disability Rights Oregon – Jude Kassar

Mental Health and Addiction Association of Oregon – Janie Gullickson

NAMI Oregon – Chris Bouneff

Oregon House – Ashley DuPuis for Rep. Jason Kropf (D); Rep. Christine Goodwin (R)

Oregon Senate – Sen. Floyd Prozanski (D); Sen. Kim Thatcher (R)

Coordinated Care Organizations – Melissa Thompson

Workgroup Membership (cont.)

Oregon Criminal Defense Lawyers Association – **Bailey Moody** for Allison Knight

Oregon District Attorneys Association – Channa Newell

Association of Oregon Community Mental Health Providers –Cherryl Ramirez

Association of Oregon Counties – Marcus Vejar

League of Oregon Cities – Dakotah Thompson

Oregon State Sheriffs' Association – Sheriff Matt Phillips

Oregon Association Chiefs of Police – Jim Ferraris

Oregon Association of Hospitals and Health Systems – Meghan Slotemaker

Oregon Judicial Department – Hon. Nan Waller; Hon. Matt Donohue

Governor's Office – Juliana Wallace 

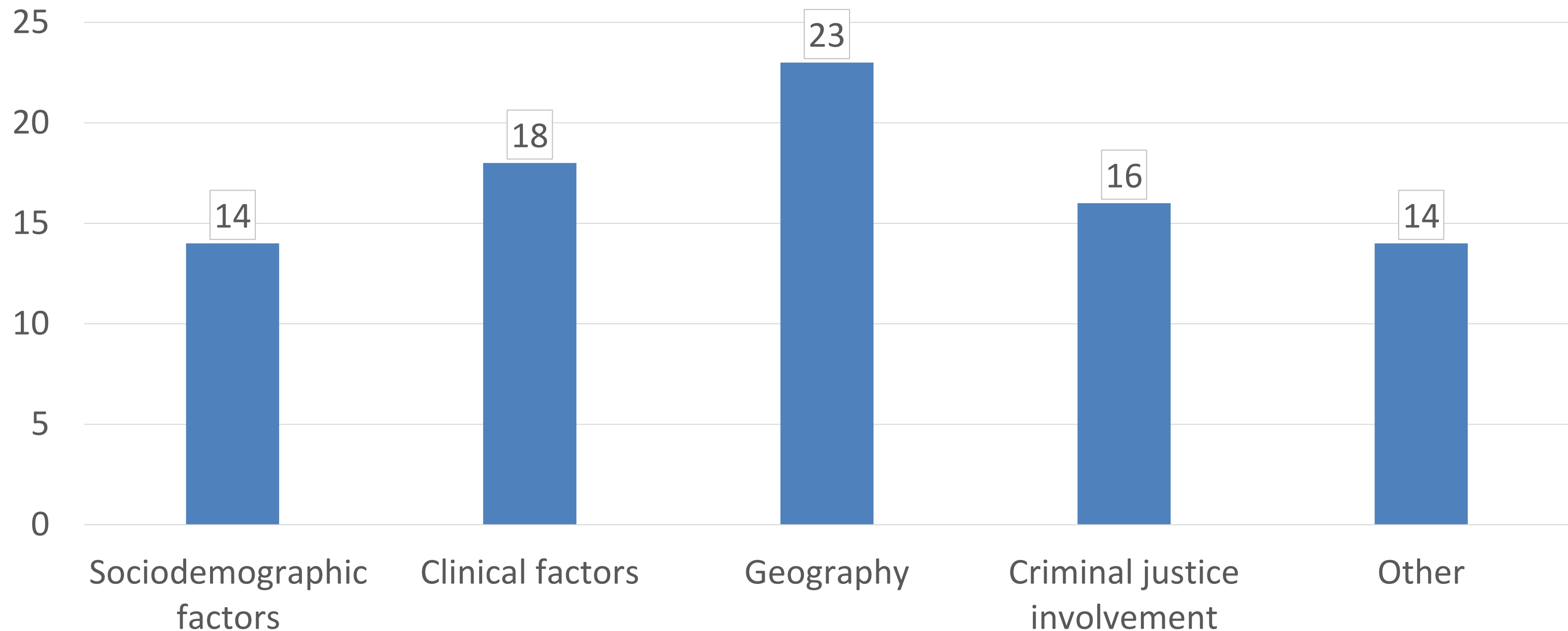
Topic 1: Equity in the Civil Commitment System

- What an **equitable civil commitment system** looks like
- How we **measure and assess** potential inequities
- Whether each stage of Oregon's civil commitment process **facilitates equity or inequity**
- What **substantive or procedural changes** would result in a more equitable system



Constituent Feedback: **Inequities in the civil commitment system?** (*n=29*)

Inequities in Civil Commitment System



Constituent Feedback: Sampling of Quotes

“Other” inequities in the civil commitment system: (n=14)

- **“Economic inequality and extreme economic stress also is a basis for inequity...”** – *Oregon Department of Human Services Constituent*
- **“Number of providers available/payor types.”** – *Oregon Association of Hospitals and Health Systems Constituent*
- **“I do not, strongly do not, believe there to be inequities in Oregon's current civil commitment system...”** – *Oregon Judicial Department Constituent*

What does an equitable civil commitment system look like?

What contributes to equity in the civil commitment system?

- Everyone gets supports they need
- Aims for fairness
- Different than equality (same supports for all)
- Subpopulations are represented proportionately to their size in the general population
 - Does underrepresentation mean group is underserved?
 - Does over-representation mean that group is unfairly targeted?

What contributes to inequity in the civil commitment system?

- Sociodemographic
(*e.g.*, race, ethnicity, language, religion, sexual orientation, gender identity)
- Clinical
(*e.g.*, stigma related to certain diagnoses, acuity of symptoms)
- Geography
(*e.g.*, urban, rural)
- Criminal justice involvement
(*e.g.*, criminal record, certain types of charges)
- Form of payment
(*e.g.*, Medicaid, private insurance)

How do we measure and assess potential inequities?

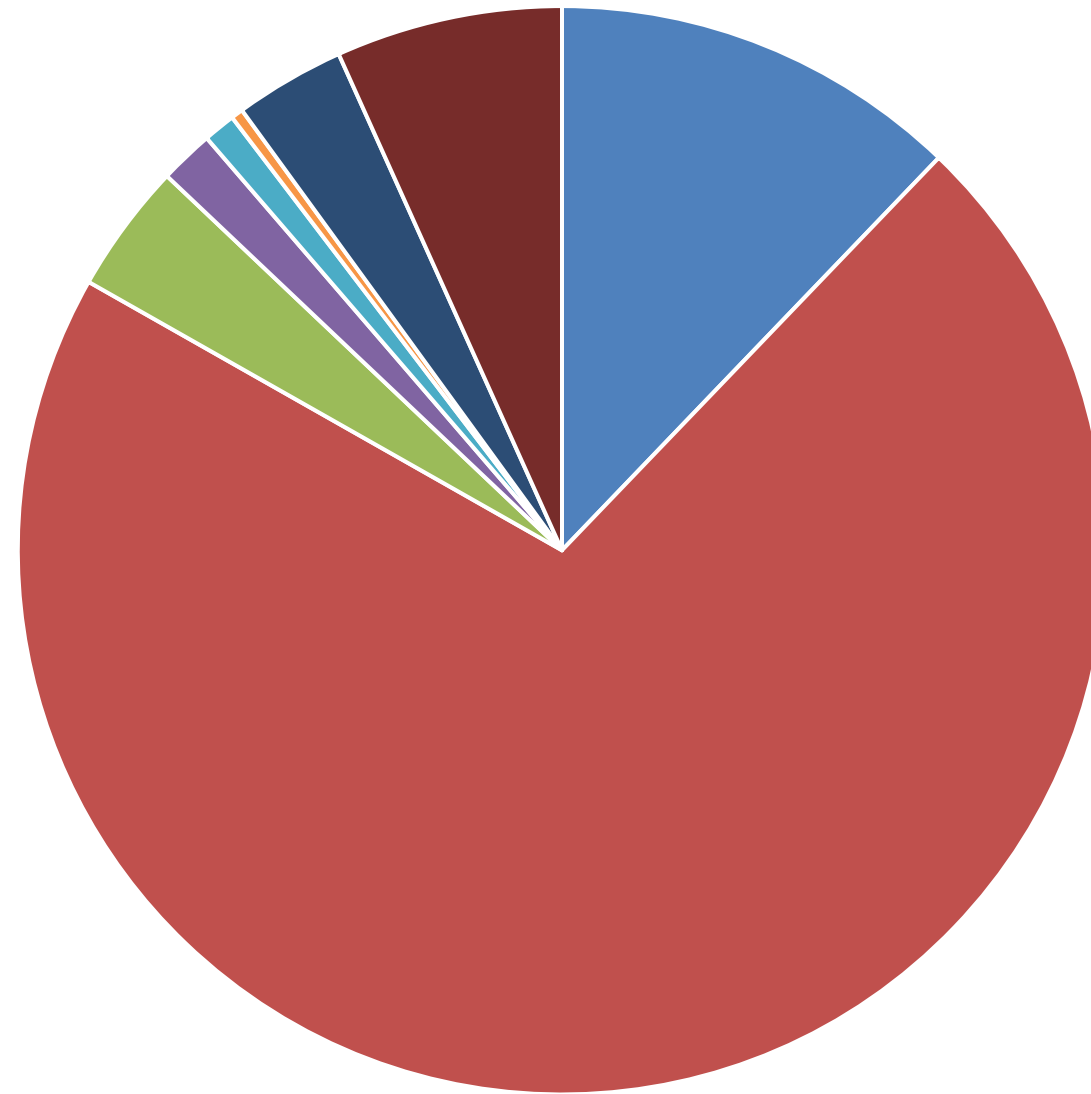
- **Measure: Collect the data**

- Quantitative data
- Qualitative data

- **Assess: Interpret the data**

- Does the data show **disparities among groups**?
- Does the data show **what is causing the disparities**?
- How do we **avoid conflating causes** (*e.g.*, racism, poverty)?

2023 Oregon Population Data by Race/Ethnicity



■ Hispanic (14%)

■ Asian (4.44%)

■ Native American (1.1%)

■ Other race (3.77%)

■ White (81.69%)

■ African-American (1.85%)

■ Native Hawaiian or Pacific Islander (.41%)

■ Two or more races (7.74%)

Petitions for Civil Commitment (NMI)

Demographics, 2020–Present

| Gender | Client Count | Client Ratio |
|--------------|---------------|--------------|
| Female | 7,017 | 46.0% |
| Male | 7,756 | 50.8% |
| Other | 581 | 3.8% |
| Total | 15,268 | |

| Medicaid Enrollment | Client Count | Client Ratio |
|---------------------|---------------|--------------|
| Medicaid | 6,091 | 39.89% |
| Non-Medicaid | 9,665 | 63.30% |
| Total | 15,268 | |

| Ethnicity | Client Count | Client Ratio |
|------------------------------------|---------------|--------------|
| Puerto Rican | 23 | 0.2% |
| Mexican | 224 | 1.5% |
| Cuban | 21 | 0.1% |
| Other Specific Hispanic | 225 | 1.5% |
| Hispanic-Spec Origin not Specified | 674 | 4.4% |
| Not of Hispanic Origin | 10,907 | 71.4% |
| Unknown | 3,692 | 24.2% |
| Total | 15,268 | |

| Race | Client Count | Client Ratio |
|-----------------------------------|---------------|--------------|
| Alaska Native | 98 | 0.64% |
| American Indian | 258 | 1.69% |
| Black or African American | 1,064 | 6.97% |
| White | 11,319 | 74.14% |
| Asian | 368 | 2.41% |
| Native Hawaiian, Other Pac Island | 163 | 1.07% |
| Other Single Race | 2,720 | 17.82% |
| Two or More Unspecified Races | 227 | 1.49% |
| Total | 15,268 | |

Source: Oregon Health Authority, 11/16/23

Discussion Section: How does Oregon's civil commitment system facilitate equity or inequity?

As a Whole (BRIEF DISCUSSION)

How do the current statutes, rules, and processes facilitate equity or inequity in the civil commitment system as a whole?

By its Parts (EXERCISE)

How do the current statutes, rules, and processes facilitate equity or inequity at each stage of the civil commitment system?

Constituent Feedback: Sampling of Quotes

How would you ensure equity in the civil commitment system? (n= 24)

- “Greater **resources** need **to** be allocated to **rural areas...**” – *Oregon Sheriffs Department Association Constituent*
- “Honestly, the only way to ensure any civil commitment is to **have the resources available to stabilize and treat**, and **for a long enough period of time**, with follow-up care...” – *Mothers of the Mentally Ill Constituent*
- “**Criteria for medical intervention need to be based on clinical assessment, not criminality or dangerousness... criminalization is where the most profound racism exists** within the system...” – *Workgroup Member*

Equity Exercise Preview

Next, we will go through **each stage in the civil commitment process** and answer the following questions:

1. Is there an **aspect of this** part of the process **that is resulting in inequities**?
2. What **characteristic forms** the basis of the **inequity at this stage**?
(sociodemographic, clinical, geography, criminal justice involvement, insurance, other)
3. What **changes** could be made **to statute, rules, or processes** to avoid this **inequity**?

Discussion Section: 1. Psychiatric Holds

1. Is there an **aspect of this** part of the process **that is resulting in inequities**?
2. What **characteristic forms** the basis of the **inequity at this stage**? (sociodemographic, clinical, geography, criminal justice involvement, form of payment, other)
3. What **changes** could be made to **statute, rules, or processes** to avoid this inequity?

Discussion Section: 2. Notice of Mental Illness

1. Is there an **aspect of this** part of the process **that is resulting in inequities**?
2. What **characteristic forms** the basis of the **inequity at this stage**? (sociodemographic, clinical, geography, criminal justice involvement, form of payment, other)
3. What **changes** could be made to **statute, rules, or processes** to avoid this inequity?

Discussion Section: 3. Warrant of Detention

1. Is there an **aspect of this** part of the process **that is resulting in inequities**?
2. What **characteristic forms** the basis of the **inequity at this stage**? (sociodemographic, clinical, geography, criminal justice involvement, form of payment, other)
3. What **changes** could be made to **statute, rules, or processes** to avoid this inequity?

Discussion Section: 4. Investigation

1. Is there an **aspect of this** part of the process **that is resulting in inequities**?
2. What **characteristic forms** the basis of the **inequity at this stage**? (sociodemographic, clinical, geography, criminal justice involvement, form of payment, other)
3. What **changes** could be made to **statute, rules, or processes** to avoid this inequity?

Discussion Section: 5. 14-day diversion

1. Is there an **aspect of this** part of the process **that is resulting in inequities**?
2. What **characteristic forms** the basis of the **inequity at this stage**? (sociodemographic, clinical, geography, criminal justice involvement, form of payment, other)
3. What **changes** could be made to **statute, rules, or processes** to avoid this inequity?

Break (5 minutes)



Discussion Section: 6. Citation and Service

1. Is there an **aspect of this** part of the process **that is resulting in inequities**?
2. What **characteristic forms** the basis of the **inequity at this stage**? (sociodemographic, clinical, geography, criminal justice involvement, form of payment, other)
3. What **changes** could be made to **statute, rules, or processes** to avoid this inequity?

Discussion Section: 7. Appointment of counsel

1. Is there an **aspect of this** part of the process **that is resulting in inequities**?
2. What **characteristic forms** the basis of the **inequity at this stage**? (sociodemographic, clinical, geography, criminal justice involvement, form of payment, other)
3. What **changes** could be made to **statute, rules, or processes** to avoid this inequity?

Discussion Section: 8. Examination

1. Is there an **aspect of this** part of the process **that is resulting in inequities**?
2. What **characteristic forms** the basis of the **inequity at this stage**? (sociodemographic, clinical, geography, criminal justice involvement, form of payment, other)
3. What **changes** could be made to **statute, rules, or processes** to avoid this inequity?

Discussion Section: 9. Hearing process

1. Is there an **aspect of this** part of the process **that is resulting in inequities**?
2. What **characteristic forms** the basis of the **inequity at this stage**? (sociodemographic, clinical, geography, criminal justice involvement, form of payment, other)
3. What **changes** could be made to **statute, rules, or processes** to avoid this inequity?

Discussion Section: 10. Assisted Outpatient Treatment

1. Is there an **aspect of this** part of the process **that is resulting in inequities**?
2. What **characteristic forms** the basis of the **inequity at this stage**? (sociodemographic, clinical, geography, criminal justice involvement, form of payment, other)
3. What **changes** could be made to **statute, rules, or processes** to avoid this inequity?

Discussion Section: 11. Outpatient Commitment

1. Is there an **aspect of this** part of the process **that is resulting in inequities**?
2. What **characteristic forms** the basis of the **inequity at this stage**? (sociodemographic, clinical, geography, criminal justice involvement, form of payment, other)
3. What **changes** could be made to **statute, rules, or processes** to avoid this inequity?

Discussion Section: 12. Inpatient Commitment

1. Is there an **aspect of this** part of the process **that is resulting in inequities**?
2. What **characteristic forms** the basis of the **inequity at this stage**? (sociodemographic, clinical, geography, criminal justice involvement, form of payment, other)
3. What **changes** could be made to **statute, rules, or processes** to avoid this inequity?

Discussion Section: 13. Trial visits

1. Is there an **aspect of this** part of the process **that is resulting in inequities**?
2. What **characteristic forms** the basis of the **inequity at this stage**? (sociodemographic, clinical, geography, criminal justice involvement, form of payment, other)
3. What **changes** could be made to **statute, rules, or processes** to avoid this inequity?

Discussion Section: 14. Recertification

1. Is there an **aspect of this** part of the process **that is resulting in inequities**?
2. What **characteristic forms** the basis of the **inequity at this stage**? (sociodemographic, clinical, geography, criminal justice involvement, form of payment, other)
3. What **changes** could be made to **statute, rules, or processes** to avoid this inequity?

Discussion Section: 15. Discharge & Dismissal

1. Is there an **aspect of this** part of the process **that is resulting in inequities**?
2. What **characteristic forms** the basis of the **inequity at this stage**? (sociodemographic, clinical, geography, criminal justice involvement, form of payment, other)
3. What **changes** could be made to **statute, rules, or processes** to avoid this inequity?

Topic 2: Developing Recommendations

Be thinking about:

- What decision-making processes need to be in place for the workgroup to complete its charge



Delphi Method

The Delphi method is an **iterative process to distill the views** of a group **using a series of questionnaires interspersed with summarized information and feedback of opinions** derived from earlier responses.



Delphi Method (cont.)


The **four key classical Delphi Features** were characterized by Rowe and Wright (1999) as:

- 1. Anonymity:** allows the participants to evaluate ideas solely on their merit without undue social pressures to conform from others in the group.
- 2. Iteration:** allows the participants to refine their views in light of the progress of the group's work from round to round.
- 3. Controlled feedback:** informs the participants of the other participant's perspectives, and provides the opportunity for participants to clarify or change views
- 4. Statistical aggregation of group responses:** allows for a quantitative analysis and interpretation of data.

Proposed CTC Workgroup Decision-Developing Recommendations (Modified Delphi Method)

Step 1: Workgroup (WG) collectively *generates ideas*


Step 2: WG members individually and anonymously *complete survey* on ideas using broad Likert scale

Step 3: Staff *analyzes survey* results  & **Facilitator** *reports ideas* that have consensus or support for further discussion

Step 4: WG collectively *discusses* and may *modify ideas* that received support for further discussion

Step 5: WG members individually *vote on ideas* as modified in Step 4 using narrow Likert scale (support, reservations, stand-down, block)  

Step 6: Report *identifies ideas* that reached consensus as “recommendations” and includes other remaining ideas with summary of reasons for support, reservation, and objection by member category

 *In contrast to the traditional Delphi Method, in which participants respond anonymously, workgroup respondents will identify the member category they represent.*

Discussion Section: Developing Recommendations

- Will the **Delphi Method** allow the Workgroup to **effectively develop recommendations** for the Chief Justice?
- Should anything **be modified**?



Step 2. Survey

- 250 – 300 ideas from a variety of sources
- Anonymous, looking for initial reactions
- 7-Point Likert scale:
 - ✓ Great idea!
 - ✓ Like with reservations (minor concerns, or support only if other things happen concurrently)
 - ✓ Initial reaction positive but want more information
 - ✓ Neutral – I would neither object nor support moving this idea forward
 - ✓ Initial reaction negative but want more information
 - ✓ Strongly inclined against but open to further discussion
 - ✓ Bad idea!
- **Two weeks to complete: is this enough time?**

Discussion Section: Developing Recommendations

- What does **consensus** mean for this group?
- How many “**Bad Idea!**” before it’s out?



Homework



- All workgroup members to distribute December survey to their CTC Workgroup constituent email distribution list
- Read ALL materials provided in advance of the next meeting



Staff contacts

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