

Program to address mental health crisis comes to county

By Sue Stafford
Correspondent

Stepping Up is a national initiative being established in Deschutes County in an attempt to reduce the number of people with severe mental health issues in the jail and emergency rooms.

Deschutes County Crisis Services Manager Collette Harris and Dr. George Conway, Deschutes County Health Services Department director, gave a presentation to last week's joint meeting of Sisters City Council and the County Commissioners about the Stepping Up program, including the establishment of a Stabilization Center (DCHS lead) and a Sobering Center (DCSO lead).

In 2018, the Deschutes County Stabilization Center Project became a key element of a County project to develop and implement a Public Safety Campus Master Plan. The project aimed to identify near-term, mid-term, and long-term phases of development to the campus over a period of up to 20 years.

Money for the program is coming from several grants. The Substance Abuse and Mental Health Services Administration (SAMSHA)

grant will provide \$330,000 each year for five years (\$1.65 million total). The SAMSHA grant is to support a law enforcement and behavioral health partnership for early diversion. The partnership is between the Bend Police Department and Deschutes County Health Services including the development of a co-responder program for the City of Bend.

The co-responder program includes embedding a health services clinician (Abby Lester) into the Community Response Team (CRT). A peer support specialist (Jessica McEwen) will do follow-up, outreach, and engage with those the co-responder team has had contact with to increase enrollment and engagement in behavioral health treatment. An administrative support specialist (Theresa Simpson) will be responsible for grant compliance and reporting.

The goals of the Early Diversion Program include: diverting more individuals with serious mental illness (SMI) and co-occurring disorders (COD) from the criminal justice system prior to arrest or booking; increasing the number of individuals with SMI/COD enrolled

in community-based services; reducing the number of individuals going to the emergency department for mental-health crises; and providing a place for law enforcement to quickly bring someone in a mental-health crisis so law enforcement can get back to their duties.

The data that supported the need for the early detection program included: 383 contacts for the CRT in 2017; 465 referrals to the Mobile Crisis Assessment Team (MCAT); and a 172 percent increase of allegedly mentally ill (AMI) calls from 664 in 2010 to 1809 in 2017.

The second grant is from the Bureau of Justice Assistance (BJA) to fund a Justice and Mental Health Collaboration Program that will add psychiatric and case management services in the amount of \$700,000. This will be a partnership between Deschutes County Health and the Deschutes County Sheriff's Office.

The goal is to increase public safety and reduce recidivism among high-risk people with mental illness and co-occurring disorders. The funding, \$233,000 for each of three years (\$700,000

total) is intended to support a stabilization center.

The program will be run out of the former probation and parole building near the Deschutes County Sheriff's Office and adult jail, on the Public Safety campus. Remodeling of the building will cost \$1,512,500. Another \$268,300 for furniture, fixtures, and security equipment will be covered by a certified community behavioral health clinic expansion grant.

There will be a full-time case manager/certified alcohol and drug counselor (CADC) to focus on those with co-occurring mental illness and substance-use disorders. The center will be provided an hour a day of telepsych services five days a week. They will also partner with OHSU for program evaluation and development of an Implementation Guide.

Both grants are aimed at reducing the number of individuals with mental illness in jail, focusing on pre-arrest and booking. The BJA grant focus is specifically aimed at enhancing services provided

at the stabilization center.

The center will have a soft opening by the end of 2019. To begin, the center will be open during daylight hours, with plans to be open 24/7. It will operate as a voluntary facility to make it more appealing to clients. The purpose of the stabilization center is to help clients avoid confinement, to see the center as a place for help, not punishment. It will be the first stop rather than the hospital emergency room or jail. Studies have shown with this type of intervention, there is a 60 percent reduction in recidivism.

The program offers peer-to-peer counseling with people who have experienced mental illness and can understand and relate to the client. The SAMSHA grant increased the number of peers on the crisis team. New mobile crisis funding from the Oregon Health Authority also allowed for hiring another peer.

All officers will receive Crisis Intervention Team training.

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Dr. Daniel Lowd, University of Oregon, Computer and Information Science

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