

Center: Offers residential treatment and crisis care

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or forced medication if they become aggressive.

The type of patients who would most likely qualify would be people who are suicidal or psychotic and are not safe at home, but are not violent enough to trigger care at a psychiatric hospital.

Baker estimates secure beds would cost an extra \$200,000 for staff and security enhancements. "Are there enough of those folks to justify what the increased costs would be?" she asked.

Alarm

The commitment to have secure beds at the crisis respite center grew out of alarm.

Warrenton and Astoria, alerted by law enforcement about the risk of potentially violent patients, demanded the security improvements weeks before the respite center was expected to open on Marlin Avenue in April 2016.

Rich Mays, the interim county manager, brokered the agreement for four secure beds with the Caring for Clatsop Coalition, the partnership between Clatsop County, Greater Oregon Behavioral Health Inc., Columbia Memorial Hospital and Providence Seaside Hospital on the respite center.

Administrators at Clatsop Behavioral Healthcare, who at the time were under pressure over management and quality of care issues, reluctantly went along. But top administrators resigned from the county mental health agency before the respite center eventually opened that July, leaving Baker — the agency's new director — and Cameron Moore — the new county manager — to fulfill the promise.

"Generally, I would say I'm satisfied with where we are with CBH," Moore said. "I think we've come a tremendously long way from two years ago."

After heavy losses and a bailout, the county and the other partners in the respite center made finding a sustainable financial model the priority.

"There is a timeline and a plan for when and how we can get to secure beds, but, again, we want to make sure we don't do that in a way that creates any financial problems," Moore said.

Broken promise

Warrenton Mayor Henry Balensifer said the respite center has had some success in relieving pressure on hospitals and the county jail, but he sees the lack of secure beds as a broken promise.

The mayor was upset after a young woman walked away from the respite center in March and a few days later was arrested for killing her dog. Warrenton police had taken the woman to Columbia Memorial Hospital in Astoria several times in the days before the dog's death, and her fiancé had also appealed for help.

"The county has failed to deliver on a promise," Balensifer said. "They can dance around the issue and say, well, we did or we didn't, or we thought we would or whatever. I don't care. Everybody was on that page."

District Attorney Josh Marquis, who has been critical of the county's mental health system, has also pressed for quicker action on secure beds.

"We certainly had hoped there would be at least a couple of 'secure' beds but we are hoping that there will be soon," he said in an email. "We clearly do not have enough jail space and even less secure housing for people with mental issues involved in criminal behavior that might not be appropriate for a jail but still need to be held until they are medically stabilized."

"We had hoped over a year ago that when the respite center opened we would have that, but I know Clatsop Behavioral Health is doing what they can to meet the crisis needs of the community. Without an adequate local jail, this will continue to be a critical need."

Balensifer has suggested the county consider a detox component at the new jail proposed for the former North Coast Youth Correctional Facility in Warrenton. The mayor — who has not yet taken a position on the \$20 million bond for the jail that voters will decide in November — said detox could help with people whose behavioral problems are more rooted in drug and alcohol abuse than mental illness.

Astoria Mayor Arline LaMear said she is grateful a new project for the homeless at a former Uniontown boarding house could have a handful of detox beds.

Columbia Memorial,

meanwhile, is looking at a larger room to screen patients in mental health crisis as part of a \$4 million expansion of the emergency department in 2019. The room could be in a quieter part of the emergency department than the small multipurpose room the hospital uses now, and could have some security.

"Even though we don't provide psychiatric services here, still we know that patients are going to come here needing help," said Trece Gurrad, the hospital's vice president of patient care services.

Episodes

Many of the people Clatsop Behavioral Healthcare

and police encounter have drug or alcohol problems that can influence mental health. The county's lack of detox and substance-abuse treatment options for people on the Oregon Health Plan — the state's version of Medicaid — can place burdens on the crisis respite center, hospitals and the jail.

"Alcohol and drugs are a fantastically effective way of dealing with emotional pain and hopelessness, but they also have a horrible impact on one's mental health," Baker said.

Baker and others understand that police often get frustrated when they have to repeatedly respond to emer-

gency calls involving a person who appears to be in mental health crisis, yet gets released from the hospital or walks away from the respite center.

"If the police were just going to drop somebody off, I can't hold on to them if there is a possibility that it's substances that are fueling their crisis," Baker said. "I can't take away their civil liberties based on substance use."

The respite center, which is financed by Medicaid, may be preventing some of the episodes that used to routinely play out in hospital emergency rooms.

At Columbia Memorial, behavioral health visits were down 23 percent last year,

according to Gurrad, while the average length of stay fell by 17 percent. The hospital also saw a decline in the number of behavioral health patients who transferred to a higher level of psychiatric care.

Baker is lifted by some of the respite center's individual successes — getting people in crisis back on their medications, into their own apartments, or stable enough to hold jobs.

"Is it completely serving the needs of the system? I would say there's a question mark there," she said. "Are we serving people really well and getting good outcomes with our clients? Yeah, that we're doing."

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