

WEBVTT

1

00:00:04.380 --> 00:00:14.009

waller_n: That some, some of us have to leave at one, but that doesn't mean the conversation can't continue Abby's going to do a roll call, so that we can see who all is here, Abby.

2

00:00:31.860 --> 00:00:33.870

waller_n: Maybe every is frozen. I don't know.

3

00:00:35.160 --> 00:00:42.930

waller_n: So what about if we do this, we'll just start with I'll start across the top of the screen. And as I see it, JOHN McVeigh

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00:00:47.040 --> 00:00:54.180

jsmcvay: Let's see. Yeah. JOHN McVeigh, I'm, I'm the manager for the mental health unit with McCain parole and probation.

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00:01:01.680 --> 00:01:03.120

williamosborne: Last point on the depression courts manager.

6

00:01:03.750 --> 00:01:04.350

Krista

7

00:01:05.700 --> 00:01:11.430

christa: Hi everybody I'm Krista Jones interim senior manager for the community mental health program at the county

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00:01:13.470 --> 00:01:14.340

waller_n: Commissioner mirror

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00:01:15.810 --> 00:01:21.600

Sharon Meieran: There, Sharon Myron Multnomah County Commissioner for District one

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00:01:23.670 --> 00:01:24.060

waller_n: And

11

00:01:25.920 --> 00:01:29.010

Ann Kasper: And caster and David rountree one line operator.

12

00:01:30.000 --> 00:01:31.620

waller_n: Thank you, Laura.

13

00:01:35.340 --> 00:01:39.570

laura cohen: Everyone I'm Laura con. I'm the Senior Director of diversion services for Cascadia

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00:01:40.800 --> 00:01:41.250

waller_n: John

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00:01:44.040 --> 00:01:55.470

John Casalino: Hey. Good afternoon, everybody. JOHN Castle, you know, I'm one of the chief deputy district attorneys and I'm in charge of our family justice division which is child abuse, domestic violence juvenile and support enforcement.

16

00:01:56.850 --> 00:01:57.960

waller_n: Thank you, Sarah.

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00:01:59.520 --> 00:02:04.320

Sarah Mullen: Hi Sarah I'm on with the local public safety Coordinating Council, thank you.

18

00:02:05.010 --> 00:02:05.490

Kyle.

19

00:02:07.200 --> 00:02:11.940

Kyle Schwab: Good afternoon, Kyle Schwab, also with the local public safety Coordinating Council, thank you.

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00:02:12.000 --> 00:02:12.540

Stephanie.

21

00:02:14.790 --> 00:02:22.020

Stephanie: Hi, Stephanie locker room at the sheriff's office. I'm the program manager for the adults in custody at the two well known, the county jail.

22

00:02:22.830 --> 00:02:24.300

waller_n: Thank you do

23

00:02:28.890 --> 00:02:29.430

waller_n: Hi, Sue.

24

00:02:32.310 --> 00:02:33.360

waller_n: You're on mute still

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00:02:33.900 --> 00:02:35.760

Stu Walker, DCJ: Yeah, gonna come up

26

00:02:37.800 --> 00:02:42.390

Stu Walker, DCJ: Stalker a senior manager with DJ associated with our mental health unit.

27

00:02:43.260 --> 00:02:44.640

waller_n: Thank you to drop right

28

00:02:46.680 --> 00:02:58.080

albrechtc: Hello, good afternoon show Albright, she criminal judge and I'm on warrant duty and multitasking. So I'm gonna I'll be listening but on not showing video

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00:02:58.770 --> 00:02:59.130

Thank you.

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00:03:00.330 --> 00:03:00.990

waller_n: He's back.

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00:03:02.190 --> 00:03:04.470

Abbey Stamp: The moment you said my name, the power went

32

00:03:06.210 --> 00:03:07.200

waller_n: It was bad karma.

33

00:03:07.560 --> 00:03:17.910

Abbey Stamp: It's probably going to happen again. So hi, everybody. Abby stamp executive director of the local public safety Coordinating Council apologizing ahead of time for all of our technical challenges today.

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00:03:19.020 --> 00:03:22.410

waller_n: Yeah, I think we dealt with Stephanie verbatim.

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00:03:29.160 --> 00:03:31.620

waller_n: Be one was to Danielle.

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00:03:33.090 --> 00:03:37.080

Danielle Therson: Danielle Thurston I'm a forensic evaluator at Northwest forensic Institute.

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00:03:38.040 --> 00:03:39.390

waller_n: Thank you. Lucy.

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00:03:45.660 --> 00:03:46.680

waller_n: With you, if you're talking to her.

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00:03:46.680 --> 00:03:47.370

Sorry.

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00:03:50.250 --> 00:03:56.040

Ruthie Benjamin: I'm Ricky Benjamin. I'm not representing them, but I'm going to bake Behavioral Health Advisory Council.

41

00:03:57.210 --> 00:03:59.550

waller_n: Thank you. I'm Barbara finish.

42

00:04:05.910 --> 00:04:08.130

Barb Rainish: Okay, weird things are happening I'm

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00:04:09.540 --> 00:04:15.180

Barb Rainish: Hi, I'm Bob reynish I am a peer support specialist and

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00:04:16.440 --> 00:04:18.300

Barb Rainish: And a freelance advocate.

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00:04:19.440 --> 00:04:19.770

waller_n: You

46

00:04:21.150 --> 00:04:22.110

Barb Rainish: Know, and I'm

47

00:04:22.290 --> 00:04:25.890

Barb Rainish: I'm going to apologize because I'm going to turn off my screen for most of this

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00:04:26.280 --> 00:04:27.060

But if I'm lucky.

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00:04:28.290 --> 00:04:28.680

waller_n: Okay.

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00:04:30.810 --> 00:04:31.470

waller_n: I'm

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00:04:33.510 --> 00:04:35.490

waller_n: See LISA ROSE.

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00:04:37.530 --> 00:04:42.090

Lisa Rose Gagnon (DRO): LISA ROSE gang own with disability rights Oregon's mental health rights project.

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00:04:44.100 --> 00:04:44.700

waller_n: And Adam

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00:04:46.560 --> 00:04:50.880

Adam Renon: Afternoon Adam or non Senior Policy Advisor for Multnomah County chair difficult for you.

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00:04:51.540 --> 00:04:52.380

waller_n: Thank you Nick.

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00:04:59.250 --> 00:05:03.570

waller_n: Nick, you're on mute. Or maybe you're off now but not we're not hearing you.

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00:05:06.150 --> 00:05:07.530

waller_n: So we'll move on to ebony.

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00:05:10.860 --> 00:05:17.820

Ebony Howard: There you go. Sorry, I'm not on video today because I'm on my way to go get my son properly attending class.

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00:05:18.210 --> 00:05:18.900

But I'm listening.

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00:05:20.310 --> 00:05:21.480

Ebony Howard: He's a rebel. He's rebelling.

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00:05:24.420 --> 00:05:26.010

waller_n: Know, it was a good thing because

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00:05:29.610 --> 00:05:29.790

waller_n: You

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00:05:32.220 --> 00:05:41.010

waller_n: See, there are a couple people that I'm not seeing names for so if you haven't heard your name called yet. You could introduce yourself, that would be great.

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00:05:46.170 --> 00:05:46.710

Jeston Black: Hi, this is

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00:05:46.800 --> 00:05:47.340

Ebony Howard: Talking to me.

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00:05:50.340 --> 00:05:57.780

waller_n: Thank you. And then there's somebody whose phone ends in 369 or 369 as part of their phone.

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00:06:05.790 --> 00:06:06.630

waller_n: Carolina

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00:06:10.740 --> 00:06:17.550

waller_n: And we're not hearing you. But I saw that Nick may have been able to figure out his audio will go to you, Nick.

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00:06:21.930 --> 00:06:23.280

waller_n: Still not hearing you, Nick.

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00:06:26.880 --> 00:06:27.360

waller_n: Yes.

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00:06:28.290 --> 00:06:33.360

Chris Thompson: This is Chris Thomas from the Oregon center behavior Hall. And just finally able to get off mute. Hi.

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00:06:34.500 --> 00:06:37.110

Chris Thompson: Thanks for having me today. Good to have you.

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00:06:37.650 --> 00:06:41.460

waller_n: Okay, um, obviously. And for anyone who's not

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00:06:42.780 --> 00:06:52.260

waller_n: Identified the introduce themselves, we, I think that we can see now, everybody. And so we apologize if you weren't able to get off mute. But I think we're going to move ahead.

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00:06:52.800 --> 00:07:02.880

waller_n: On since we only have about an hour to talk and I think that the topic that we're going to discuss his potential legislation, although I don't see

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00:07:05.520 --> 00:07:08.250

Abbey Stamp: Justin black is here from government. Oh.

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00:07:08.250 --> 00:07:08.910

waller_n: He is okay.

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00:07:09.180 --> 00:07:10.770

waller_n: Honey, you're just a new right

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00:07:11.310 --> 00:07:11.880

Abbey Stamp: To look at

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00:07:15.210 --> 00:07:16.140

waller_n: There's the beard.

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00:07:18.600 --> 00:07:22.470

Jeston Black: You know, it's kind of a little grayer since March so

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00:07:24.120 --> 00:07:38.490

Jeston Black: Changes over time. Um, so yeah, so I think my job today is to give kind of a brief overview of what's going on. It's a legislative in the world related to behavioral health

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00:07:39.420 --> 00:07:55.200

Jeston Black: And I'm going to start super high level and and kind of try to work down. So I think the first thing that we need to acknowledge is the budget deficit that the state is facing going into actually in the current biennium. And then going into the next biennium.

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00:07:57.390 --> 00:08:05.160

Jeston Black: We, they just had a special session special session. Number two, where they were able frankly to fill a lot of holes.

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00:08:06.990 --> 00:08:13.590

Jeston Black: Without making deep cuts. They did take away some money that had been earmarked for community mental health.

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00:08:14.610 --> 00:08:21.930

Jeston Black: As well as a couple, some behavioral health services to aging adults, they took that money away.

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00:08:22.920 --> 00:08:33.000

Jeston Black: But I will say overall it was not a horrible special session, especially with the cuts that we were expecting. Now we're expecting the next revenue forecast.

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00:08:33.840 --> 00:08:51.390

Jeston Black: At the end of September, we expect that one to go down. Again, we don't know if it'll go down far enough that the legislature has to come back into session and make additional products. But I think what we're expecting is a continued role of bad news.

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00:08:52.590 --> 00:09:02.430

Jeston Black: In this current biennium because their, their revenue forecast was based on businesses actually being back in business and fully running in July.

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00:09:03.240 --> 00:09:12.480

Jeston Black: So that has not happened. Obviously, we're still on zoom. So we expect the next revenue forecast to not be good for this current biennium.

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00:09:13.380 --> 00:09:27.360

Jeston Black: Then as we look into the next biennium. The state is currently \$4.7 billion short of where they thought they would be for next biennium. That is a gigantic cut

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00:09:28.500 --> 00:09:34.290

Jeston Black: So we and that is going to be corbel when I apologize for the dog in the background.

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00:09:36.120 --> 00:09:52.170

Jeston Black: We, and I think the other thing to recognize is that the behavioral health system in Oregon is largely financed through general fund dollars you know there is Medicaid for some services, but largely it is dependent on general fund.

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00:09:53.400 --> 00:10:08.790

Jeston Black: Programs. So going into the next special session that is going to be the dark cloud that clouds every conversation we have about behavioral health is the need to find cuts in general fund. Now there are a couple conversations happening.

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00:10:09.570 --> 00:10:28.290

Jeston Black: To restore or create a buffer in the in the general fund around behavioral health it largely centers around beer, wine and spirits tax at the state level, there is one group.

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00:10:29.370 --> 00:10:36.510

Jeston Black: Oregon recovers, that is pushing an idea to do kind of a fee across all the alcohol spectrums.

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00:10:37.050 --> 00:10:46.110

Jeston Black: The Oregon Health Authority released last week a beer and wine tax increase to fund to fund behavioral health services.

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00:10:47.100 --> 00:10:52.860

Jeston Black: All of the all of the many proposals out there. The League of Cities has their own proposal around beer and wine.

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00:10:53.280 --> 00:11:03.600

Jeston Black: They range from as low as, you know, I think it's like 25 million to \$500 million. So they are sizable chunk of money.

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00:11:03.990 --> 00:11:17.100

Jeston Black: But in reality, when you're facing a budget hole like we are. That is likely to get eaten up by just supplanting cuts so investment in behavioral health is going to be very difficult in this upcoming session.

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00:11:18.120 --> 00:11:23.520

Jeston Black: With all that being said before coven hit, you know, the governor convene her

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00:11:24.210 --> 00:11:39.000

Jeston Black: Behavioral Health work group, which I think there are a few people on this call, who also serve on that group that group is working through a number of recommendations for the behavioral health system. They include pure respite.

103

00:11:41.280 --> 00:11:49.140

Jeston Black: Workforce Development and I will say the workforce piece is still largely undefined. But I would say

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00:11:49.740 --> 00:12:04.050

Jeston Black: If you were to say, if you were to sum up the gist of it. It's around pipeline and retention of employees but doesn't fully address the pay scale for people who are currently working in behavioral health

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00:12:06.210 --> 00:12:15.930

Jeston Black: The other thing is, housing, I think there's been steady understanding that supportive housing and housing period are drastically needed in the behavioral health system.

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00:12:16.830 --> 00:12:32.940

Jeston Black: To help on many levels. And then there are also concepts like CCP HC payments, which is a federal match for certain providers to provide an enhanced payment and I will say that one is really expensive.

107

00:12:34.020 --> 00:12:49.620

Jeston Black: So that will be a heavy lift in this budget cycle but so that's that's where the governor's behavioral health work group has been largely focused and please. Those of you that are on the group if I miss something please chime in.

108

00:12:51.900 --> 00:12:58.590

Jeston Black: We also have Senator presents key, who has been convenient, a group about I think their label for it is that

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00:12:59.670 --> 00:13:09.810

Jeston Black: It's labeled the decriminalization of behavioral health workgroup they are centering around three possible legislative concepts.

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00:13:10.650 --> 00:13:22.170

Jeston Black: One was the bill that they have last session which redefined some things around civil commit to change the, the kind of the breadth of people that could be simply committed

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00:13:24.240 --> 00:13:34.290

Jeston Black: Another concept would allow courts to compel intervene early intervention with people who are presenting in the courts.

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00:13:34.950 --> 00:13:40.470

Jeston Black: Early on, and really, I think, push them into some programming fairly early on.

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00:13:41.250 --> 00:13:48.000

Jeston Black: The other one is to do trial visits in the community for people who are being who are currently committed at the State Hospital.

114

00:13:48.330 --> 00:13:57.510

Jeston Black: I believe the goal of that is to help people transition out of the state hospital and back into the community. I will say, I have heard, I'm not a member of that group.

115

00:13:58.710 --> 00:14:07.860

Jeston Black: So that is kind of what I have heard coming out of that group. I will also say that I have not heard that there is consensus around those three ideas.

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00:14:08.760 --> 00:14:19.410

Jeston Black: That they continue to work on them, but that they have not reached consensus and that they're in fact some consumers that are have some big concerns

about those three concepts.

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00:14:21.660 --> 00:14:36.930

Jeston Black: The Oregon Health Authority is likely to come back with the package that we saw during the short session that is largely to find more funding for Steven assist stepped down residential secure residential

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00:14:38.280 --> 00:14:48.030

Jeston Black: Other types of residential to help people get out of the state hospital and to find additional residential places for people in the anus. This docket to go

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00:14:50.670 --> 00:14:56.760

Jeston Black: Let's see. Um, the other thing that's out there is there's a large coalition working on

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00:14:59.790 --> 00:15:10.350

Jeston Black: Behavior mental health parity. You may remember there was a bill six, eight years ago that said we were supposed to have parity amongst payers for behavioral health

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00:15:10.920 --> 00:15:25.890

Jeston Black: There was also a study done last year that showed that that has not been achieved that parody, both in a reimbursement level on the commercial side and a payment side on the Medicaid side is just not happening. And so they are looking at

122

00:15:27.180 --> 00:15:43.890

Jeston Black: Giving either DC BS or Oh ha some more teeth in how they track that and how they're able to force insurance carriers and see CEOs to require payment parity around mental health services that are provided.

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00:15:45.270 --> 00:15:52.920

Jeston Black: And I will say in our own world. You may remember Multnomah County had a bill last session that looked at the disparity between

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00:15:54.120 --> 00:16:04.140

Jeston Black: mental health treatment and substance use disorder treatment because there was, you know, as much as 20% delta between those payments for

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00:16:05.760 --> 00:16:07.800

Jeston Black: Spending the same amount of time with a patient

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00:16:08.940 --> 00:16:13.410

Jeston Black: We were able to get additional resources set up for that, but

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00:16:14.340 --> 00:16:24.330

Jeston Black: The budget whole has made it so they have not been to, they have not been able to fully implement that pay increase. So our hope is as people work on mental health payment parity.

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00:16:24.600 --> 00:16:33.030

Jeston Black: That that includes substance use disorder and that we're able to actually bring up some payments that go to providers for those services.

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00:16:34.380 --> 00:16:42.240

Jeston Black: So that was a long rambling world, but those are kind of the things, oh I want, I forgot what the Senate bill 24 workgroup

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00:16:42.870 --> 00:16:56.490

Jeston Black: So coming out of the last long session. They jammed through some some language around adn assist and who was required to be sent to the State Hospital. I think the initial

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00:16:57.480 --> 00:17:04.860

Jeston Black: Concept was is that people who had misdemeanors. They were trying to keep those individuals outside out of the state hospital.

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00:17:05.580 --> 00:17:12.630

Jeston Black: There was, I think, because it happened very last minute there's been some disagreement over the language used in that policy.

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00:17:13.170 --> 00:17:30.690

Jeston Black: So my understanding is, there's been a Senate bill 24 work group that is that consensus or near consensus on a legislative concept to come into the next session and to clean up that language and make it more workable. So now I will stop because I just ranted or drone for a long time.

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00:17:33.630 --> 00:17:41.100

waller_n: So do people have questions or comments. I know that a number of people on this call are on some of those some of the work groups.

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00:17:42.930 --> 00:17:44.760

waller_n: I think a number of us are on the Senate bill.

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00:17:46.080 --> 00:17:53.280

waller_n: Senate bill actually had we had a consensus going into the short session that did not

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00:17:54.540 --> 00:18:02.520

waller_n: Get past because the session was cut short. We've continued to meet during all of this time. And we've gone beyond

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00:18:04.020 --> 00:18:13.620

waller_n: They've been new issues that have come up that some of which we have consensus on some of which we don't have consensus on and I anticipate that we will

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00:18:15.420 --> 00:18:21.870

waller_n: Focus on those things in which we have consensus on and knowing that they need to pass. Specifically, the issue of

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00:18:23.460 --> 00:18:27.780

waller_n: The use of the word requirements there be a finding dangerousness

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00:18:29.250 --> 00:18:30.930

waller_n: To send somebody to

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00:18:32.250 --> 00:18:35.850

waller_n: The State Hospital for misdemeanors. And that's been a problematic.

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00:18:36.600 --> 00:18:51.720

waller_n: Finding for evaluators for forensic evaluators and so we've come up with language about I think that really captures what the concern is, which is more along the lines of, does the person, create a public safety risk if in the community.

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00:18:53.340 --> 00:19:04.110

waller_n: The other big issue that we were trying to address was to make it clear that if somebody is going to doesn't meet hospital level of care.

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00:19:05.100 --> 00:19:16.980

waller_n: But there isn't an immediate placement that you can't simply hold somebody in jail and have hearings every seven days in order to until you find a placement and so that's that's

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00:19:18.270 --> 00:19:25.980

waller_n: What the statute, when it was in the last days of the last long session, how the language came out and

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00:19:26.430 --> 00:19:36.210

waller_n: There's been an effort to clarify that given the ruling and make which says there's a due process right if people not to be held after a finding of enable in jail.

148

00:19:36.900 --> 00:19:48.840

waller_n: For long periods of time. So I know that commissioning reruns on the on decriminalizing mental illness group and I know that there has been a lot of going on in terms of

149

00:19:49.890 --> 00:19:52.650

waller_n: Maybe not pushing forward the civil commitment.

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00:19:53.760 --> 00:19:55.770

waller_n: Statute and taking a bigger look at it.

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00:20:04.620 --> 00:20:04.920

Abbey Stamp: Either

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00:20:06.180 --> 00:20:08.100

Abbey Stamp: Additions or questions.

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00:20:09.030 --> 00:20:13.350

Jeston Black: I do want to actually comment on something that commercial Myron put in the chat is that the Secretary of State.

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00:20:13.680 --> 00:20:24.750

Jeston Black: did an audit on the behavior health system at the state level and that came out today. We have I haven't read it yet. So, but I think there was an expectation that it was going to point out some big enough.

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00:20:25.050 --> 00:20:27.630

Jeston Black: Came into the behavior of the system.

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00:20:31.260 --> 00:20:35.910

Sharon Meieran: So we knew nothing shocking, but, uh, but horrifying.

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00:20:40.410 --> 00:20:44.310

waller_n: Only just only jays budget highlights for the next session and

158

00:20:45.360 --> 00:20:50.640

waller_n: The ask has gone up the focus is going to be on reducing racial and ethnic disparities.

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00:20:52.950 --> 00:20:57.120

waller_n: It's a big ask. I assume that it will be as will everything from down

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00:20:59.760 --> 00:21:10.350

Abbey Stamp: I'm catch me jump in for just a quick second and then I want to give an some time to talk about anything legislative I heard there was something else you wanted to bring up as well.

161

00:21:10.860 --> 00:21:21.930

Abbey Stamp: Um, I wanted to make sure that we adequately introduced ebony Howard, who's the ebony who is managing first days of school stuff so Ebony's new to the lipstick team.

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00:21:22.530 --> 00:21:33.930

Abbey Stamp: She's the community engagement specialist who is working on the MacArthur grant and so she'll be helping to support the community advisory board of the diet and weight house and helping us form.

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00:21:34.380 --> 00:21:42.180

Abbey Stamp: A new a new way to really dive and tackle racial ethnic disparities using data and policy shifts. So this is her second week on the job.

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00:21:42.960 --> 00:21:56.220

Abbey Stamp: Getting oriented through this this interesting, interesting days is challenging him. Well, it's at least challenging so that that's 70 so welcome everybody to the team. And then I also wanted to mention

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00:21:57.480 --> 00:22:00.660

Abbey Stamp: We had a small meeting a little while ago with

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00:22:01.890 --> 00:22:08.190

Abbey Stamp: Laura and judge Waller and Commissioner Myron staff and put together a

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00:22:08.790 --> 00:22:16.830

Abbey Stamp: Really simple spreadsheet of all of the different groups that are looking at the intersection of behavioral health and criminal justice and judge Waller I'm just

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00:22:17.070 --> 00:22:33.480

Abbey Stamp: Wanted to make sure you had a chance to put your eyes on it and make sure that I adequately represent what I heard heard you say, or maybe inadequately described that and then it. We're happy to send it out as at least just have a touch point of who's doing what, where and why

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00:22:35.820 --> 00:22:36.900

Abbey Stamp: That's why you're muted.

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00:22:38.580 --> 00:22:44.910

waller_n: I do have a few changes. I tried to make them in my computer, I needed to move it into my home computer. Anyway, I'm

171

00:22:45.510 --> 00:22:53.430

waller_n: I'm so the technology was confounding me that I will get back to it. Another thing, just so that everyone is aware, we had

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00:22:53.850 --> 00:23:12.240

waller_n: There is a lot going on locally. There's also a lot going on at the state level and we recently had realized that we needed to make sure that we were all in alignment. So the CO chairs and staff of I think 10 different statewide level groups had our first

173

00:23:13.320 --> 00:23:17.220

waller_n: Get together virtual get together so that we're sure that we're really all aligned

174

00:23:18.600 --> 00:23:25.230

waller_n: We had planned this to start in early March and it got swept away in the coven

175

00:23:27.300 --> 00:23:39.330

waller_n: Tsunami and we decided we needed to get back to it, which we have. And I think that there are many, many things that we are all aligned on and nobody saw any great conflict and

176

00:23:40.140 --> 00:23:49.800

waller_n: Senator Republicans have said that we absolutely needed to continue to meet so that we are in these times that are going to be very difficult from a budget.

177

00:23:50.310 --> 00:23:59.370

waller_n: Standpoint, we need to keep moving forward and keep looking for those points of alignment, so that we can have as big an impact.

178

00:24:00.090 --> 00:24:14.910

waller_n: As possible in the next session and preserving and expanding to the extent possible, how we provide services and opportunities for people with significant mental health. So I was pleased that it I thought it went incredibly well.

179

00:24:16.020 --> 00:24:27.840

waller_n: In terms of giving us kind of some forward momentum and I was impressed with how much notwithstanding everything that's going on between the economy and covidien

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00:24:28.950 --> 00:24:29.400

waller_n: Are

181

00:24:30.420 --> 00:24:47.010

waller_n: Our need to focus on disparities that people have continued to move forward, not withstanding the challenges and do some really good work in terms of trying to come up with how we deal with behavioral health issues in a more humane and more inclusive fashion.

182

00:24:48.900 --> 00:25:02.040

waller_n: Commissioner, Amir and I don't know if you had any in terms of the decriminalizing mental illness committee. Any update on the legislation that you might be coming out of that committee. I think there's been some changes. Recently, perhaps

183

00:25:02.730 --> 00:25:13.410

Sharon Meieran: Well, um, I guess just one of the things that the last me. I don't know if there's a meeting since I'd been at the last, the one I was last attended

184

00:25:14.550 --> 00:25:16.890

Sharon Meieran: But there was conversation about

185

00:25:18.150 --> 00:25:25.590

Sharon Meieran: The fact that kind of jumping in to try to to just change statutory language.

186

00:25:26.850 --> 00:25:37.290

Sharon Meieran: But the group hadn't actually reached just consensus on it, or even discuss sort of the larger picture of the common

187

00:25:37.830 --> 00:25:56.220

Sharon Meieran: Goals and what we're seeking to do in changing the statutory language and it sort of could potentially be a situation of putting the cart before the horse. And so there was discussion about having a breakout group to talk more about that.

188

00:25:58.110 --> 00:25:58.920

Sharon Meieran: Issue.

189

00:26:00.180 --> 00:26:05.550

Sharon Meieran: And there was a meeting of that group, but it didn't. It was not very directed and I'm

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00:26:07.350 --> 00:26:15.210

Sharon Meieran: I don't know, but I feel the before we're talking about, like, oh, we need to do 15 days here do 72 hours here, what

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00:26:16.170 --> 00:26:32.220

Sharon Meieran: You know, what are, what are we actually talking about why are we talking about this, what would we want to accomplish. How can we potentially make change that is that that everyone

192

00:26:34.290 --> 00:26:49.680

Sharon Meieran: Agrees is is going in the right direction. Ideally, so I think that conversation is really important, or I'm not sure that there's going to be really any movement around getting to, you know, sort of a change in statutory language.

193

00:26:51.030 --> 00:26:55.410

waller_n: In America, do you remember what the name of the paper is we can send it out.

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00:26:56.520 --> 00:27:02.010

waller_n: To everyone but I thought that it was a very good in terms of looking at the issues of civil commitments and I know that

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00:27:02.070 --> 00:27:04.380

Sharon Meieran: That paper. Well, yeah, yeah, yeah.

196

00:27:04.440 --> 00:27:06.090

waller_n: point of discussion for the

197

00:27:06.270 --> 00:27:06.900

Sharon Meieran: Group.

198

00:27:07.140 --> 00:27:13.110

waller_n: Yes, it looks historically at civil commitment and really we we went from a

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00:27:16.530 --> 00:27:25.590

waller_n: That the pendulum is swung in big directions. Historically, and that instead, we need to be looking at how do we put people in a position where we are helping them.

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00:27:26.520 --> 00:27:27.810

Sharon Meieran: Power. Yeah.

201

00:27:27.840 --> 00:27:38.040

waller_n: Exactly than them having better control. So it was a very, very kind of scholarly dry article article but it's, I think we can send it out to this group. I think that

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00:27:38.040 --> 00:27:40.410

Sharon Meieran: Yeah, I will track that down. Thank you.

203

00:27:46.800 --> 00:27:50.760

waller_n: And you have some some legislative sure

204

00:27:52.110 --> 00:28:07.530

Ann Kasper: But so, a couple things. Number one, so Emily's COMMITTEES I'VE BEEN finding out and listening to lawyers and other people around the state of Oregon scrambling to find the \$2,000 for the forensic evaluations and it's just really curious.

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00:28:08.430 --> 00:28:23.790

Ann Kasper: To each evaluations \$2,000 that correct, and no one's quite sure where that's coming from is that money is that being tracked some how how much the state is paid for that or what entities are paying for all those evaluations and then I had another comment.

206

00:28:24.120 --> 00:28:37.560

waller_n: And I'm talking about the aim assist evaluations. Yes, so there there is money that comes from most evaluations start off with defense lawyer asking for

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00:28:38.370 --> 00:28:46.140

waller_n: Through the criminal defense and I can't remember what the name of the fund is but fund funds those initial evaluations.

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00:28:46.620 --> 00:28:58.320

waller_n: On if somebody goes to the State Hospital than the hot and if they're found unable, and they end up at the State Hospital than the state funds. The revaluations while they were at the State Hospital.

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00:28:58.830 --> 00:29:07.770

waller_n: If they are in community restoration. I think that's probably what you are asking about their revaluations that are done periodically.

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00:29:08.190 --> 00:29:18.900

waller_n: And those are usually done through OSH also because the Health Authority has responsibility ultimately for the agent assist process. There was discussion, I think, in one of the meetings.

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00:29:20.340 --> 00:29:22.800

waller_n: Where you were attending about

212

00:29:24.480 --> 00:29:36.450

waller_n: That that's it's a lot of money that's going into those revaluations do we need revaluations before a finding of able and that would be one way of reducing

213

00:29:36.990 --> 00:29:45.780

waller_n: What the State Hospital is having to pay for it. I know that there's been some discussion about whether or not we should reduce the

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00:29:48.000 --> 00:29:53.490

waller_n: educational requirements for evaluators whether we need psychologists, psychiatrists doing the evaluations.

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00:29:55.230 --> 00:30:03.090

waller_n: I and I know that there was some discussion about whether the county's should be responsible for the evaluations, which I think

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00:30:04.200 --> 00:30:13.980

waller_n: I'm looking at bill Osborne and others from the county where I know that I know how I know what the response has been to that that that is would be

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00:30:15.270 --> 00:30:23.340

waller_n: A mandate that is unfunded, so I think that, yes, there is. You know, we are keeping trying to start keeping track.

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00:30:23.790 --> 00:30:29.850

waller_n: OJT received funding from the legislature in the last long session to get some data analysts and

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00:30:30.600 --> 00:30:46.290

waller_n: It's not we're not able to share it publicly yet because it's not quite there. But there's an agent assist dashboard that is giving us a lot more information about adn assist in terms of the numbers of cases evaluations, how long it's taking to get

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00:30:47.520 --> 00:30:57.780

waller_n: People from here to there in terms of evaluation. So I can't answer directly. But yes, that information is in the process of being collected

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00:30:58.230 --> 00:31:09.420

waller_n: So that we have a better understanding and I think that there's some big policy issues that are part of your question, which probably are beyond today to answer in

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00:31:10.050 --> 00:31:25.560

waller_n: And I know that the county's probably all have a fairly strong feeling that they don't have the ability to absorb I'm paying for the real vowels. When somebody is in the community participating in community restoration. I don't know, Bill, if you had anything to add to that.

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00:31:26.130 --> 00:31:33.390

williamosborne: No, I mean we excuse me, we run on a very tight budget to begin with. And if we were to absorb all of the

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00:31:33.990 --> 00:31:45.420

williamosborne: The ongoing community restoration evaluations, it would decimate our budget, we would not be able to provide almost any other type of service, other than we evaluations. At that point in time.

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00:31:47.130 --> 00:31:56.610

waller_n: All right, Bill. I don't know if you want to comment on as it, but I'll say as a judge, I think that the decision about whether or not somebody can aid and assist

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00:31:57.180 --> 00:32:06.930

waller_n: Is beyond my capacity, simply by chatting with somebody to make a decision. That's why we have evaluators in the first place. And so I'd hate to have that

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00:32:08.010 --> 00:32:19.110

waller_n: That I just chat and say, gosh, yeah. You're good to go. I don't feel qualified to make that kind of decision. Just based upon a chat. I think it's a more nuanced.

228

00:32:19.470 --> 00:32:30.000

waller_n: Um evaluation that often involves a lot of testing and and that we get better results when we are using those with the expertise to do the evaluations.

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00:32:31.200 --> 00:32:32.520

waller_n: Got another question that way into

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00:32:33.660 --> 00:32:45.240

Ann Kasper: So, um, it is a question about having port online and how that works. Judge while I have you done court online and we've been hearing in those committees, a lot of discussion about

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00:32:46.140 --> 00:33:01.800

Ann Kasper: Psychiatry online and jails and things like that. How it doesn't work. And I'm just curious. So pre coated yet. Some of us have been a hospital where we never saw psychologist live wasn't an organism into place. So I was just really curious.

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00:33:03.300 --> 00:33:06.930

Ann Kasper: It could it be legislation or something like this about

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00:33:08.070 --> 00:33:23.100

Ann Kasper: Court online as understand on the county right now for civil commitment ports, everything is done online the lawyers meet people online and for somebody who's not in a very stable state. I think it'd be very difficult. So could you guys speak to that.

234

00:33:24.420 --> 00:33:26.640

waller_n: Um, yes, we are doing a lot

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00:33:28.050 --> 00:33:28.830

waller_n: Remotely

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00:33:30.090 --> 00:33:39.960

waller_n: And I think that from the perspective. I know I've talked to folks from Unity about whether we continue to do civil commitments.

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00:33:41.460 --> 00:33:58.560

waller_n: Remotely because it requires less stress on people and being transported to a courthouse, or to some other place I've done some here. I've done some civil commitments remotely. I've done hearings where people are at unity at the State Hospital and

238

00:34:00.480 --> 00:34:08.040

waller_n: Because technology has gotten so good when we're using good technology. It's pretty good. I have a in my courtroom.

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00:34:09.180 --> 00:34:26.370

waller_n: I have a very large screen when we move to the court new courthouse will each have 200 inch screens. I mean, it's like having the person. It's in the courtroom, because the technology is good and we're not we're not looking at people in one inch squares. We're looking at people.

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00:34:27.540 --> 00:34:35.520

waller_n: Life size, which I think is helpful. It certainly has increased our capacity. During this time, I think for people in mental health court.

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00:34:36.870 --> 00:34:39.330

waller_n: You know, there's a big technology gap and

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00:34:40.620 --> 00:34:51.900

waller_n: We have people who have phones but sometimes they don't have the technical technological experience to be able to accurately and successful use their phone. So we've had some things that

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00:34:52.470 --> 00:35:00.630

waller_n: At some time other than in the middle of the court might be kind of funny, where people have put us in trying to be helpful. They put themselves on hold, which is

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00:35:01.290 --> 00:35:10.410

waller_n: The entire group of people on the call than been listening to hold music as opposed to being able to communicate with each other. So we're

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00:35:10.950 --> 00:35:28.170

waller_n: In mental health court. We don't try to get people on the screen so that we can see them because I'm to enter, whether it's zoom or WebEx. It's sometimes harder for people. And so, we call them into a meeting remotely people seem to like the phone calls and are appreciative of them.

246

00:35:30.240 --> 00:35:39.360

waller_n: Many people are asking when they can come back to court, which I think is an interesting thing they want to come to court and so we last week we

247

00:35:39.840 --> 00:35:47.850

waller_n: Had a few people come to court and this is hard on all of us, the pandemic in terms of connection and relationship. I think for people with

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00:35:48.660 --> 00:35:57.900

waller_n: In mental health Court who were working on establishing relationship and connection and support. It's even it's harder. They don't have

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00:35:58.590 --> 00:36:13.080

waller_n: Many of us on this call, we probably have family and friends that we can rely upon and many people that I'm dealing with have are not yet to a point where they've been able to re establish their family connections. And so it's very difficult. And so we're looking at ways that we can

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00:36:14.820 --> 00:36:18.660

waller_n: Modify doing all remote and having some people come in.

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00:36:20.460 --> 00:36:31.080

waller_n: People who did come in, they really needed to come in, they were not doing very well and we were able to get some extra support around them to make sure and I just want to give a plug while we're doing court remotely.

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00:36:33.000 --> 00:36:48.900

waller_n: Bills, people are going out and finding people John's people are going out and finding people. One day recently they PO one of our POS and case managers took a car and I think they went out and they located and these were people who

253

00:36:50.430 --> 00:37:06.150

waller_n: Haven't been able to, for one reason or another live in a shelter, because it's too traumatic or and they located people out in the community on the streets. I think nine people were able to provide some extra support around them. So it has to be a combination of

254

00:37:07.230 --> 00:37:13.680

waller_n: Virtual and then sometimes when it's needed doing it in person. And so anybody who's in custody.

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00:37:14.760 --> 00:37:24.840

waller_n: I am there in person. They're going to be in custody and in front of me in custody. I'll be there so that they can see me. I think it's hard. We do the aid and assist docket. A lot of the lawyers are

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00:37:26.130 --> 00:37:27.510

waller_n: On the screen. I think it's

257

00:37:28.650 --> 00:37:30.540

waller_n: AN ASSIST is a time when people are

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00:37:31.710 --> 00:37:38.310

waller_n: Sometimes the most symptomatic. And I think that it's been an interesting

thing, having people on the screen talking

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00:37:38.790 --> 00:37:45.570

waller_n: When people are are otherwise already very symptomatic and sometimes hearing voices and I'm saying, No, no, no, really, it's your lawyer.

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00:37:46.230 --> 00:38:00.600

waller_n: Talking on the screen right now and overall iPhone having a screen helps immensely when people can see each other, helps us for all the on the zoom calls you know if you can see people's faces you know that there

261

00:38:01.890 --> 00:38:10.260

waller_n: May be getting it or listening or, you know, you can tell that there's a question there. So that's where we are. We're some things we're going to continue to do I think that we've

262

00:38:11.040 --> 00:38:22.320

waller_n: Just got an email today from the Game Center asking about our what we've done in terms of providing competency restoration remotely and we do do some remote

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00:38:23.760 --> 00:38:34.950

waller_n: competency training those folks do by phone, and all we have done some evaluations. Dr. Milk each group and I see that Dr. Pearson is on the call.

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00:38:35.250 --> 00:38:44.070

waller_n: They've made arrangements, so that they have within their office, oftentimes, the people that we're dealing with don't have access to a computer. So they've set up a room.

265

00:38:44.760 --> 00:38:51.990

waller_n: In their office where someone can come in if they're out of custody and participate in the evaluation with the doctor being in another room so we're

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00:38:53.490 --> 00:38:59.700

waller_n: That's I think that unity is also been open to the evaluators doing evaluation is over an iPad.

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00:39:00.090 --> 00:39:11.310

waller_n: And they've provided iPad so some of it is good. Some of it is probably not always what people need. But I think that my hope is, and many of the groups that I'm on has indicated that we need to

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00:39:11.610 --> 00:39:20.100

waller_n: Capture those things that are good and not just go back to the way we were doing things because it's because we can for those things that we can continue we

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00:39:20.550 --> 00:39:32.880

waller_n: Provide far greater access and less trauma, sometimes by not requiring people to come to the courthouse and by doing it remotely and so we will look for those to keep those things that are working

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00:39:34.920 --> 00:39:36.300

waller_n: Long answer and sorry

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00:39:36.510 --> 00:39:40.950

Ann Kasper: Yeah, no, it's good, it's good. It's really interesting because these days have brought that up and there's

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00:39:41.400 --> 00:39:51.480

Ann Kasper: Someone who goes out of different extreme states. I'm just having my lawyer everybody on screen, it's very, very difficult extremely difficult to to believe that

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00:39:52.080 --> 00:40:02.400

Ann Kasper: Everything is real. And so I think it's it's choice. But the great thing. I know from helping to build community, things like that. Wi Fi is really hard in these hospitals buildings.

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00:40:02.760 --> 00:40:09.660

Ann Kasper: Also Mickey Logan has told me always at Oregon State Hospital, just my access is difficult. So, and

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00:40:10.290 --> 00:40:29.100

Ann Kasper: Just personally I think if you have first contact with them in person. It's great. I think after that. But that to be tried and committed everything just online in the future. So covert makes sense in the future. Just online. It seems like a very difficult process for something

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00:40:30.180 --> 00:40:38.820

Ann Kasper: None of us want that, you know, we on screen. Look, we can make it on screen in the way right screen without being in person with the people making

judgments about

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00:40:41.220 --> 00:40:43.230

Ann Kasper: Your journey or anybody else got that.

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00:40:43.800 --> 00:40:49.170

williamosborne: No, you know, it's been interesting because we've gone through several iterations of this conversation.

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00:40:49.890 --> 00:40:57.690

williamosborne: Initially we used to take everybody to the courthouse and the hospitals and other people really felt like that was traumatizing for a client.

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00:40:58.020 --> 00:41:07.680

williamosborne: To be taken out of the hospital and taken to a courthouse. And so, you know, unity came up with a compromise of creating a courtroom within their own building and

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00:41:08.670 --> 00:41:15.030

williamosborne: I agree with you. I think it's going to have to be. It's going to have to be a combination of what works right now.

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00:41:15.780 --> 00:41:29.430

williamosborne: The sheriff will go to the hospital and be with the person while they're going through the civil commitment hearing so they're there in the room with them. They're helping them with the technology so they can kind of walk them through the process and although

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00:41:31.410 --> 00:41:41.040

williamosborne: That may not feel great. Right now the feedback we've gotten from folks has been really positive. And the other piece of it is the investigators, you know,

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00:41:41.370 --> 00:41:49.560

williamosborne: During Corbett are still actually going out to the hospitals to meet with people so so they are having a person to person contact while they're in the hospital just

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00:41:51.870 --> 00:42:02.580

Sharon Meieran: And I, I, thanks Bill. That's, that's exactly right. That's what I've been hearing from a number of sources as well i think i think you're exactly

right in and

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00:42:03.990 --> 00:42:04.980

Sharon Meieran: In the sense that

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00:42:06.090 --> 00:42:06.780

Sharon Meieran: You know,

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00:42:07.890 --> 00:42:29.460

Sharon Meieran: We still, we need to be doing to the best of our ability, what's right for individual people. And for some people, the, you know, virtual approach can work really, really effectively and for some it can't. And if it doesn't, we need to be working to ensure we meet

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00:42:30.690 --> 00:42:41.190

Sharon Meieran: People in person as we can obviously coven is a its own bizarre situation, but it's been really interesting to see at the county that with

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00:42:42.420 --> 00:42:49.560

Sharon Meieran: Sort of virtual appointments and telephone appointments for mental health related issues that

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00:42:50.970 --> 00:43:04.950

Sharon Meieran: That the no show rate is has gone way down like that. There's actually more engagement and that people are able to be connected to the system in a way that they haven't with the technology. So it's, um,

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00:43:05.490 --> 00:43:15.060

Sharon Meieran: You know, it's sort of exploring this the brave new world. But, uh, but figuring out how it actually impacts people and how to best utilize it.

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00:43:16.200 --> 00:43:31.110

Ann Kasper: Yeah, I think it's good. It's interesting thing about making regulations for further on down, especially in court rooms and also for civil commitment Unity's room is so small that I've been there with families where I love to see commitment of the person because it's too small family.

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00:43:32.760 --> 00:43:41.280

Ann Kasper: Yeah, but it's interesting to see where their head. How do you regulate where people have choices don't have that going forward.

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00:43:47.460 --> 00:43:50.580

waller_n: Any legislative updates beyond what

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00:43:51.810 --> 00:43:52.650

waller_n: Justin.

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00:43:58.830 --> 00:44:01.140

Lisa Rose Gagnon (DRO): This is Lisa Rose from Disability Rights of Oregon, I

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00:44:01.200 --> 00:44:07.800

Lisa Rose Gagnon (DRO): Had a follow up question on the SS dashboard. Do you know if they are tracking demographics.

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00:44:11.340 --> 00:44:19.290

waller_n: We want to. Here's the difficulty which JD is is dealing with at a, at a whole level.

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00:44:21.150 --> 00:44:36.060

waller_n: We've not had the process of ourselves collecting demographics. I mean, we get it from others and that has its own issues. So in the criminal justice system. Oftentimes, it is

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00:44:37.620 --> 00:44:51.810

waller_n: Right now demographics are in terms of race and ethnicity, gender, are there in a police report and there's not a protocol that the police have come up with it to collect to I

302

00:44:52.590 --> 00:45:05.670

waller_n: To allow for self identification and so we're looking at. There's a whole group in. Oh, JD, it is looking at how do we collect demographic information in

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00:45:07.080 --> 00:45:14.310

waller_n: using best practices. And I think that most would agree that best practices are to allow people to self identify

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00:45:14.760 --> 00:45:21.330

waller_n: What they are rather than you looking at me and saying, Oh, here's what you are, which sometimes that we've done some

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00:45:22.020 --> 00:45:40.530

waller_n: Analysis of how accurate or inaccurate. It is. And it's a fairly big, the number of inaccurate through somebody else doing the identification and not asking is not the most accurate. So yes and no. We're in the process of trying to figure out how we do that so that we can

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00:45:42.090 --> 00:45:47.520

waller_n: Have accurate and good data and use a best practices methodology of collecting it

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00:45:48.720 --> 00:45:53.760

Lisa Rose Gagnon (DRO): That makes sense. Thank you for that information be interested to see what they come up with

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00:45:54.390 --> 00:46:04.500

waller_n: Yeah i mean it's it's a big system wide issue for OJ D and we want to do it right. But also, we want to move forward. So

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00:46:09.720 --> 00:46:11.340

waller_n: Other questions, concerns.

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00:46:13.980 --> 00:46:15.300

waller_n: I have a couple updates.

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00:46:16.410 --> 00:46:24.240

waller_n: Oh god, I think I've told you before about our participation through the Game Center in a community of practice. The initial work.

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00:46:26.730 --> 00:46:30.930

waller_n: Has wound up. We have a concept for developing

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00:46:32.400 --> 00:46:46.290

waller_n: And there's not a right title yet behavioral health regional assessment triage emergency drop off. We've had many, many different things that we've called it centers and we

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00:46:48.570 --> 00:47:03.480

waller_n: We have a strategic plan, there will be no ask for the next long session. We know that there is no funding available and we have too much work still to be done to develop the concept. But when we had our big statewide

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00:47:05.940 --> 00:47:11.040

waller_n: Meeting of chairs of all of the work groups committees councils.

316

00:47:12.120 --> 00:47:24.240

waller_n: There's him generally to be support for us moving forward with the concept. The concept, whether it's virtual or whether it's brick and mortar, we haven't gotten to that point yet. But the idea is to

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00:47:25.290 --> 00:47:37.080

waller_n: Have a place where people can be diverted out easily diverted by first responders whether police or others out of the criminal justice system and into something that is more therapeutic

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00:47:37.860 --> 00:47:57.750

waller_n: Ideally, we want to have the ability to have an on site so brain. So the center so that the issue of is it math or is it mental health doesn't have to be a really quick, quick, fast decision that will have both the capacity to stabilize people, whether it's mental health or math.

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00:47:58.770 --> 00:48:07.200

waller_n: And then we have been working in Oklahoma County on with the Cascadia unity.

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00:48:07.800 --> 00:48:17.670

waller_n: DePaul Kerrigan group that Laura has doing been doing a marvelous job on in trying to come up with an actual plan for our community.

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00:48:18.240 --> 00:48:25.020

waller_n: And Laura. I don't know if you have anything that you want to say on where we are. We're in the concept stage, but I think there's good momentum at this point.

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00:48:26.490 --> 00:48:42.180

waller_n: And we've been working with Commissioner Mirren Myron on how do we, in terms of what the county is doing. And these concepts of a place where people can easily be diverted from so it's still a lot of thought process, but I think that we're slowly making some progress.

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00:48:43.920 --> 00:48:45.750

waller_n: Or if you had anything that you wanted to add to them.

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00:48:46.770 --> 00:48:58.410

laura cohen: I know. Thank you. I completely agree. I think we've got a lot of support. I think we've got a really solid idea. Now we just have to take to the next level and to do that we really need some dedicated resource to be able to

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00:48:59.910 --> 00:49:08.820

laura cohen: Kind of continue to gather and move this project forward. And so that's one of the things that I am hoping to accomplish in the next couple months is

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00:49:09.210 --> 00:49:21.330

laura cohen: Finding a way to secure some resources to be able to really dedicate time specifically to this because it's a it's a pretty big behemoth of a project one that I think will benefit the community greatly

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00:49:22.860 --> 00:49:31.380

laura cohen: And hopefully keep people out of jail and help them find sort of the, you know, sort of one stop shop. No Wrong Door concept that Judge Waller mentioned

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00:49:32.100 --> 00:49:43.590

laura cohen: will hopefully enable it to be much smoother easier process. But right now we have just the idea and a lot of excitement around it and that we have, to actually make it a little bit more from reality.

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00:49:45.390 --> 00:49:50.130

waller_n: And I anticipate that we will probably be invited back for the next stage of the

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00:49:52.290 --> 00:50:00.390

waller_n: Gains initiative, they've kept all of the states that were part of it last year and I anticipate them to be asked to move forward.

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00:50:01.110 --> 00:50:12.000

waller_n: There's a nice article that came out about what Oregon is doing. So I thought that was a good sign that they wanted to showcase us a little bit in terms of the concept that we're developing. And I also want to since Laura's

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00:50:13.140 --> 00:50:18.150

waller_n: just reminded me that through john McVeigh, and through the funding that we go through the criminal

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00:50:18.990 --> 00:50:35.370

waller_n: Justice Commission, we have case coordination through Cascadia now available to our mental health court participants, which is wonderful. We have eight hours of the prescriber available every week and we have they've started picking up cases.

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00:50:36.960 --> 00:50:47.370

waller_n: Pre people getting out of jail, which is fantastic because it'll be a much smoother transition back into the community and so we're quite excited that that is underway.

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00:50:48.540 --> 00:50:54.630

waller_n: We've been waiting for a bit now and it's, I think, going to make mental health court for participants much

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00:50:56.670 --> 00:51:02.340

waller_n: Easier go for some of them to have all of the services and support provided in one place.

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00:51:03.390 --> 00:51:06.030

waller_n: Any other updates from anyone that behavior health issues.

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00:51:07.350 --> 00:51:11.100

Ann Kasper: I'm not an update, but I hope I'll send it to Christina. I got something for my

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00:51:11.100 --> 00:51:12.840

Ann Kasper: Colleagues in New York State about

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00:51:12.870 --> 00:51:24.720

Ann Kasper: What's called an inset program I NS ET and it's for people who really do keep going. Secondly, in and out and they have 80% retention rate in that program. So I'll just send it to you.

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00:51:25.800 --> 00:51:30.510

Ann Kasper: And as you're going through this committee at you can maybe add some of those things into it.

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00:51:31.800 --> 00:51:34.920

waller_n: And was that is that associated with the mayor's office.

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00:51:35.700 --> 00:51:40.590

Ann Kasper: It. No. Is it Sunday through the state. It's actually in Rochester, New York, which is

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00:51:40.590 --> 00:51:48.630

Ann Kasper: Poker has been here about Rochester lately. Right. But it's in Rochester. So they had it out there. But it was an eight by somebody who rents nappers which is

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00:51:49.950 --> 00:51:58.830

Ann Kasper: Actually New York City is very different because they really tied with mental health, much more than our city. So it's through one of the people in the city.

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00:51:59.550 --> 00:52:00.810

Sharon Meieran: Did you say it's called

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00:52:00.900 --> 00:52:02.400

Sharon Meieran: In inset

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00:52:02.850 --> 00:52:07.380

Ann Kasper: I N s et and I'll just send an email right now to Christina she can send out

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00:52:08.730 --> 00:52:10.230

waller_n: Of Yeah, looks like a good model.

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00:52:14.310 --> 00:52:22.650

jsmcvay: So I'm basically just giving a quick update, because I know we're almost out of time. I'm so with parole and probation.

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00:52:23.610 --> 00:52:42.210

jsmcvay: We have in this kind of ties into what Judge Waller was talking about with mental health court. But we did it kind of an evaluation of how many folks, we have lost since coven began. So we've lost about 43% of our caseload.

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00:52:43.410 --> 00:52:46.290

jsmcvay: So that's about 200 folks.

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00:52:47.490 --> 00:52:59.940

jsmcvay: So a lot of those folks are we looked at the rate of folks that we who are experiencing homelessness and we went to about 63% of our population.

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00:53:00.690 --> 00:53:05.820

jsmcvay: Is experiencing homeless. Now, from about 25% in 2017

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00:53:06.450 --> 00:53:19.620

jsmcvay: So what we're going to be looking at is actually changing our model of supervision with kind of the restrictions based on coven we no longer can have folks dropping into the meat building anymore.

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00:53:19.830 --> 00:53:40.830

jsmcvay: Which is how we used to engage with folks. So one of the things that we're looking at doing is trying to obtain some covert related funding and develop an outreach team and have basically and begin doing actually begin doing supervision in specific locations are like an outreach vehicle.

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00:53:41.880 --> 00:53:50.610

jsmcvay: Where, where, where we're also supplying resources to folks like charging station food, clothing, etc. So

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00:53:51.030 --> 00:54:00.600

jsmcvay: Because that's how we would get people to engage, particularly those who were pretty symptomatic is that they would come in for resources and then we would begin to engage them and supervision.

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00:54:00.960 --> 00:54:16.320

jsmcvay: So we're in the we're, we're in the proposal phase right now and looking at that. But that's something that's a business change that we would be looking at doing with a mental health unit is is being predominantly mobile. So

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00:54:17.910 --> 00:54:21.600

waller_n: I think that's a great idea. JOHN What happened last week when

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00:54:23.580 --> 00:54:27.960

waller_n: Carrie and amber got a car and just went around looking for people and

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00:54:28.320 --> 00:54:38.850

waller_n: They, they successful as a credibly helpful to have them connect with

some people who otherwise they have no phones. They have no house, or they wouldn't have been able to connect with

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00:54:39.420 --> 00:54:52.530

jsmcvay: Yeah we I mean we've had the model for a long time where we basically go out in kind of our regular field gear with our cars and whatnot. And this this model is very different. It's basically it's like a

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00:54:52.920 --> 00:55:02.670

jsmcvay: Van and folks would and it's not kind of your traditional supervision model. It's basically being stationed at a location for a period of time.

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00:55:03.660 --> 00:55:12.330

jsmcvay: And kind of interacting with everybody that's coming up to your including those when we're hoping to find the folks that we've lost that are on supervision.

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00:55:12.930 --> 00:55:25.320

jsmcvay: Because a lot of them are in on the street right now. So, so hopefully that will work. And we're gonna we're gonna we're investigating it to see if it's feasible and give it a try. So

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00:55:30.750 --> 00:55:31.830

waller_n: Anything else from anyone.

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00:55:34.380 --> 00:55:35.820

waller_n: Okay. And I think we're

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00:55:37.680 --> 00:55:40.590

waller_n: We will say goodbye and two months. Hopefully we'll

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00:55:41.730 --> 00:55:55.860

waller_n: I don't know when we'll be able, I was gonna say, hopefully we'll be able to come together, but I don't anticipate that in two months. So even say it, but hopefully in two months we'll, we'll all be feeling like we are getting closer to, let's see, two months.

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00:55:57.990 --> 00:55:59.790

waller_n: Well, in two months we will be

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00:56:02.550 --> 00:56:04.170

waller_n: Hopefully we'll all have smiles on our face.

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00:56:05.820 --> 00:56:06.690

waller_n: In two months.

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00:56:08.910 --> 00:56:13.410

Sharon Meieran: Hopefully we will lots gonna happen in two months.

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00:56:13.470 --> 00:56:30.630

Abbey Stamp: Yeah, plenty of smiles today, but it's hard to ever everybody's just a bunch of little squares, but keep up the good work, happy to see you all, if anything comes up in the meantime, email me email Christina will get your answers are books connected. Thanks everybody.

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00:56:30.870 --> 00:56:31.800

waller_n: Thank you. Goodbye.