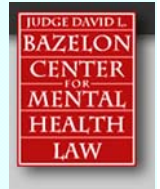




SAFER PDX

A PROJECT OVERVIEW



Safer PDX is one of five national pilot projects working together with The Bazon Center for Mental Health Law in Washington DC. Cascadia Behavioral Healthcare was asked by Bazon to participate, and serves as the lead for the Portland site. The genesis of the project arose from the sometimes tragic outcomes of mental health crises that require police intervention.

Throughout the country, psychiatric emergency calls to police are so commonplace that they are widely regarded as routine and an inevitable aspect of police operations. People with symptoms of serious mental illness and substance abuse are at very high risk of involvement with the police, often resulting in their arrest or transport to an emergency room. Aside from the problems this creates for the individual, it diverts police resources from the pursuit of serious crime.

Ironically, communities often have small programs demonstrating positive and often cost-saving outcomes for this population, but because of difficult bureaucracies, isolated funding streams, and relentless budget cutting, the system fails to capitalize on what it knows.

This project aims to bring stakeholders together for an in-depth analysis and of and multi-system solutions to situations most vulnerable to bad outcomes.

STRUCTURE OF THE PROJECT

The Portland site is supported by three different committees

1—The Performance Improvement Team (PIT), led by William Nunley, MD (Cascadia) includes:

Amy Anderson—Cascadia Consumer Advisory Council
Jay Auslander—Cascadia Project Respond
Greg Borders—Cascadia Senior Director, Crisis Services
Liesbeth Gerritsen, PhD—Portland Police Bureau, Crisis Intervention Team Coordinator
Sarah Goforth—Central City Concern, Director of Recovery and Mental Health Services

Ron Lagergren—Multnomah County Manager
Kris Miller—LifeWorks NW Program Director
James Powell—Portland Police Bureau Analyst
Steve Sutton—Multnomah County Manager
Portland Police Bureau—Three officers

This team has performed in-depth analyses of forty specific instances when police interacted with people in mental health crisis. The team has also done organizational analyses of Project Respond, Bureau of Emergency Communications (the 911 system), Portland Police programs that touch those with mental illness, and Multnomah County's Mental Health Crisis Line call center.

2 — The Steering Committee, chaired by Maggie Bennington-Davis, MD (Cascadia) is attended by:

Judy Shiprack— Multnomah County Commissioner
Amanda Fritz—Portland City Commissioner
Dora Perry—Policy Advisor
Suzanne Hayden and Andy Olshin—Citizen's Crime Commission
Assistant Chief Eric Hendricks and Lt. Pat Walsh—Portland Police Bureau
Sheriff Daniel Staton and Deputy Bobbi Luna—Multnomah County Sheriff's Office

Bob Joondeph—Disability Rights Oregon
Beckie Child—Mental Health America
Terri Walker— NAMI Multnomah
Joanne Fuller—COO, Multnomah County
Patrick Cosgrove—Adventist Hospital
William Nunley, MD - Cascadia
Jim Kahan, PhD— City Club
Gregg Lowe—Multnomah County Circuit Court Judge

This committee receives the analyses from the PIT and makes recommendations for program and policy change, seeks methods to improve communication and collaboration throughout the system, and determines the areas of focus for the project.

3 — The Advisory Board includes statewide stakeholders and policy makers, and will be called into service when high level policy changes

Bill Barr—Regence Blue Cross
Ed Blackburn—Central City Concern
Chris Bouneff— NAMI Oregon
Rick Cagen — Silverton Hospital, & Cascadia Board Chair
David Cutler, MD— Multnomah Co. Mental Health Services
Sharon Gary-Smith—Cascadia Special Projects
Bruce Goldberg, MD—Oregon Health Authority
Suzanne C. Hayden — Citizens Crime Commission
Matthew Hennessee—Vancouver Avenue 1st Baptist Church

Mary Monnat—Lifeworks
Kathy Oliver—Outside In
Sister Maggie Pastro—Providence Health Plans
David Pollack, MD—Oregon Health Sciences University
Chip Shields—Oregon State Senator
Constantin Severe—Independent Police Review Division
Vikki Vandiver, PhD—PSU School of Social Work
Derald Walker, PhD—Cascadia Behavioral Healthcare
Ted Wheeler—Treasurer, State of Oregon

SAFER PDX

A PROJECT OVERVIEW—CONTINUED

PROJECT CONVENER

The Bazelon Center for Mental Health Law (www.bazelon.org) is the convener of the project, and serves as liaison among the five sites (Austin, Pittsburgh, White Plains, Detroit, and Portland). Bazelon receives information from the five sites, collates the information, ascertains the need for policy change at the federal level, and will eventually make recommendations to other communities wishing to decrease the need for police involvement during times of crisis.

RESULTS TO DATE

Results to date: The top three “root” causes of the situations that involve police and people in crisis are:

- As crisis evolves, information is more and more crucial... AND more and more difficult to come by!
- Current community mental health and addictions treatment services cannot consistently meet the complex and escalating need
- Police often are used to transport people in crisis to emergency rooms

The four organizational consults inform us

- BOEC (911) answers a million calls every year!
- BOEC and Multnomah Call Center both respond to people with mental health crises
- Cascadia’s Project Respond and Portland Police Bureau are tightly coupled
- There is great potential to leverage the work of the four agencies

REMARKS

Analyses of the community mental health system have been done before. Police, jails, homeless advocates, business leaders, and providers of community mental health and addictions services know what is missing, and understand the gaps in services. The difference with Safer PDX, and the potential “magic” in the project, is that leaders from City and County government, law enforcement, business, provider organizations, and the advocacy community are looking at the same information at the same time and developing a shared perspective in order to agree on improvements. The gaps and problems in systems are “owned” by everyone, and solved by multiple stakeholders.

Safer PDX has the potential to effect change *across* agencies, funding streams, and services to leverage existing resources.