

## **Portland's Committee on Community-Engaged Policing Subcommittee for People with Mental Illness**

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To PCCEP members

CC Ted Wheeler, Nick Fish, Amanda Fritz, Chloe Eudaly, Jo Ann Hardesty,  
Interested Parties

### **Recommendation on Item 89 - Support for Multnomah County Resource Center**

The Subcommittee for People with Mental Illness recommends the City of Portland provide 25% of the operating cost for up to five years for Multnomah County's new resource center.

89. The United States expects that the local CCOs will establish, by mid-2013, one or more drop-off center(s) for first responders and public walk-in centers for individuals with addictions and/or behavioral health service needs. All such drop off/walk in centers should focus care plans on appropriate discharge and community based treatment options, including assertive community treatment teams, rather than unnecessary hospitalization.

Item 89 is arguably the most expensive and complicated portion of the Settlement Agreement, and yet it has not been discussed by the COAB or PCCEP. No negotiations by the city were started with Health Share Oregon - the current CCO, or with Multnomah County, the sole provider of funding for services for people on Medicaid seeking medical treatment for mental illness or addiction.

City leaders have argued they are not responsible for providing mental health services, a function historically handled by state and county governments. But with the system in crisis, the city provided services for people with mental illness and addiction, including employing a licensed mental health coordinator, maintaining contracts with Cascadia Behavioral Healthcare and Central City Concern to provide direct services for people with mental illness and addiction, and designating specific Portland Police Bureau

officers to work with those with mental illness and/or addictions.

The City Council agreed to each item of the settlement agreement and has declined multiple opportunities to rewrite the agreement and eliminate Item 89. The item stands as equal to all other items.

In 2015 the US DOJ defined Item 89 in the media and in court as “aspirational” and expressed no intention to enforce the item. The City of Portland claimed Legacy’s Unity Center fulfilled the requirement - though Legacy leadership at the time denied Unity would act as a “drop-off” or “walk-in” center. Clinical experts disagree that the Unity Center has served a “drop-off” or “walk-in” center.

Just months after the launch of Unity Center in Spring of 2017, the Compliance Officer/Community Liaison listed the psychiatric emergency service as a sufficient response to Item 89. The COCL’s determination came prior to a torrent of patient and clinical complaints, staff resignations, staff and patient lawsuits, and state service suspensions for Unity. In an adjoining recommendation, the Subcommittee for People with Mental Illness asks that the Compliance Officer/Community Liaison re-evaluate its classification of Item 89 using new and abundant evidence from the public record.

Multnomah County has moved forward to develop a model resource center which will be a substantial service for people with mental illness and addictions who are in crisis. Planned services for the resource center are equal to or greater than the “drop-off” or “walk-in” center(s) minimally outlined in the Settlement Agreement.

Capital development is underway Remaining are operating costs. It’s likely most or all of this ongoing cost - mostly salary - will need to come from County general funds and not CCO, state or federal resources. A substantial area of costs is payroll for peer-delivered services - including engagement, peer support, security, quality assurance & training, and management. We estimate peer services will be about 25% of operating costs for the resource center.

To gain substantial compliance with Item 89, the Subcommittee for People with Mental Illness recommends the City of Portland contribute 25% of the operating costs for the resource center. The expense to the city will hopefully be offset by the more efficient services for people with mental illness and addiction, leading to less use of police and other city services. While counties traditionally bear the cost of health services, clearly the City of Portland suffers the major impact on its streets every day of those who are underserved.