

The Behavioral Health Unit (BHU) News

April is going to bring numerous opportunities for the BHU to facilitate important trainings, partner with its stakeholders, and plan its participation in upcoming community events.

A new class of Enhanced Crisis Intervention Team (ECIT) officers will attend training during April. This will bring the total number of ECIT officers to over 70. ECIT officers often respond or are dispatched by 9-1-1 to calls that are determined to be related to an individual with mental illness. The additional training the ECIT officers receive includes: the indicators of mental illness; crisis communication skills; interaction with consumers and family members; and education on community resources. The training will include role-playing scenarios applying patrol tactics to persons in behavioral crisis.

Also, the Portland Police Bureau (PPB) and the BHU are partnering with National Alliance on Mental Illness (NAMI) for the 12th Annual NAMI Northwest Walk. NAMI is the largest education, support, and advocacy organization serving the needs of all whose lives are touched by mental illness. NAMI is also an important partner of the BHU. The walk takes place on May 18th, 2014 at 1pm and will start on the EAST end of the Vera Katz Eastbank Esplanade, under the Morrison Bridge. If you are interested in participating in the walk, please go to www.namiwalks.nami.org/portlandpolice. If you have any questions regarding the walk, please contact Lieutenant Cliff Bacigalupi at: 503-823-0097

Please visit the BHU website (<http://www.portlandoregon.gov/police/62135>) for more information on the BHU.



BHU Stories From The Field

On March 21, 2014, North Precinct patrol officers received multiple calls about a subject who was running into traffic in the lower Northeast Broadway area, expressing the belief that he was being chased. During the call, the officers learned that the same individual had generated numerous police calls earlier in the day resulting in ECIT officer's involvement and his transport to local hospital on a police hold.

While responding to the scene, officers were advised that a person with a mental illness, who appeared to be under the influence of narcotics, had run into a local bakery where he had asked for help, stating "People are chasing me and threatening my life."

The manager at the bakery instructed the individual to wait in the lobby while she called the non-emergency number. The individual grew impatient and told the manager that she was not taking him seriously. The manager handed the phone over to the individual; however, the individual hung up on the dispatcher.

The bakery manager dialed 9-1-1 again and instructed the individual to wait in the lobby. As she walked away from the counter toward the kitchen area, the individual followed her behind the counter. At that point the individual picked up a serrated knife and ran out into oncoming traffic.

The individual was then spotted running head-on into rush hour traffic while trying to flag down a TriMet bus. The officers got close enough to engage the individual and saw that he was holding the knife he had stolen from the bakery to his throat. They were able to convince him to drop the knife and comply with their commands.

The BHU then took the individual to a hospital on a new police hold. While at the hospital, officers learned that the individual had a long history of mental health issues and that he had used methamphetamine the previous day and was evidently coming down from the effects of it.

Service Coordination Team

In December 2013, Neighborhood Response Team (NRT) officer Chris Gjovick contacted the Service Coordination Team (SCT), seeking services for a transient individual named "Michael" living under the Morrison Bridge in SE Portland. Michael was an elderly wheelchair bound man suffering from alcoholism and blindness. He had reportedly been living outside in the same area for the last two years. At the time the officers contacted him, he had only physically moved from under his spot once or twice that week. The Service Coordination Team contacted Michael on Monday December ninth. He was lying under several blankets and tarps which were almost entirely covered in bird droppings, urine, feces and garbage. It was very apparent that Michael had literally not stood up or moved from his prone position for an extended period of time.

When initial contact was made, Michael was not receptive to any help. He repeatedly asked to be left alone and stated "he was fine". He claimed he not had a drink in a couple weeks because he hadn't stood up in a while due to an untreated broken leg. He said he was living off a jar of peanut butter he had acquired from "people who bring me food." Michael mentioned that outreach workers and other people in the community would drop off food and had even offered him housing. However, he said he wasn't interested in staying in a dirty motel in downtown or Old Town Portland because he was convinced he "would starve to death."

SCT contacted a Mobile Crisis Unit (MCU) through the Behavioral Health Unit (BHU) and asked if the team could contact Michael and assess his well-being based on his current situation. The BHU contacted Michael again and found him in the same state. It was determined that Michael's health was in serious jeopardy and he was placed on a director's hold by Project Respond. Upon arrival at the hospital, the severity of his injuries became apparent and there was concern he might lose part of his feet and legs. SCT staff contacted the county Aging and Disability Services, DHS and a homeless outreach worker from JOIN to prepare wrap-around services for Michael in case he was discharged from the hospital. SCT and JOIN remained in contact throughout Michael's stay although he was ultimately committed.

As of March 2014, Michael continues to improve and thrive in the hospital. His most severe wounds have healed, he is learning to walk again without the assistance of a wheelchair and he remains clean and sober. The long term plan is to transfer him to a care facility in Utah where he can continue to convalesce in an area closer to extended family.

Meet Bret Burton

Officer Bret Burton has been with the Portland Police Bureau (PPB) for over six and a half years. Bret has spent time working in Central Precinct (both Nights and Afternoons); and as part of the Mobile Crisis Unit (MCU). Prior to working with the Portland Police Bureau, Bret worked for the Multnomah County Sheriff's Office (MCSO) for 3.5 years before transferring to PPB. At MCSO, Bret's assignments included Patrol, the Transit Police Division, Flight Observer, and the Special Investigations Unit.

Bret is the Service Coordination Team (SCT) Officer within the BHU. His primary responsibilities are assisting the Program Manager in identifying and screening potential SCT clients, maintaining the Neighborhood Livability Crime Enforcement Program (NLCEP) list, overseeing the Drug Impact Area program, conducting outreach, transporting SCT clients from jail to treatment, working with the Department of Community Justice (DCJ) to coordinate treatment of clients, and addressing any other coordination issues related to the program.

Bret states that in order to be successful in his position, one must "have the willingness to approach issues from a broad perspective and an ability to work within a system that is not always accustomed to police involvement. Also, it helps to have the ability to form connections with a diverse group of people and work together for positive outcomes." Bret explains that some obstacles that he has encountered while working for the BHU and the SCT are the lack of available resources for people having frequent police contact due to mental illness and/or drug addictions. He states, "It is often difficult to get people connected with long-term, sustainable services due to the lack of resources and/or funding."

As far as his role in the BHU, Bret explains that the most rewarding aspects of his job are working with a team of officers and support staff that are dedicated to serving people that are not able to help themselves. An example of this was an outreach effort Bret conducted with a homeless subject who had been arrested dozens of times for crimes related to his drug addiction. Bret states, "He didn't trust police and was resistant to entering SCT because he'd never tried drug treatment and was suspicious of police offering to help him. After several contacts and conversations we convinced him to enter the program and, a few months later, he is doing well. He has begun to rebuild his life that had previously been shattered by decades of addiction, criminality, and incarceration."

Bret Burton

BHU
SCT
Officer