

Behavioral Health Unit Advisory Committee

Meeting Minutes

February 24, 2016

Committee Members

Lt. Tashia Hager, PPB; ***Sgt. Bob McCormick**, PPB; **Sgt. Chris Burley**, PPB; **Ofc. *Amy Bruner-Dehnert**, PPB; **Emily Rochon**, PPB SCT; **Shannon Pullen**, National Alliance on Mental Illness; **Bill Osborne**, Multnomah County Behavioral Health; **Cristina Nieves**, Commissioner Fritz's Office; ***Felesia Otis**, Volunteers of America; **Floyd Pittman**, Community Representative; ***Jan Friedman**, Disability Rights Oregon; **Joe Hagedorn**, Metropolitan Public Defender's Office; ***Kathleen Roy**, Central City Concern; **Beth Epps**, Cascadia; ***Maggie Bennington-Davis**, Health Share of OR; **Cpt. Mary Lindstrand**, Multnomah County Sheriff's Office; **Mike Morris**, Oregon Health Authority Addictions and Mental Health Division; **Melanie Payne**, Bureau Of Emergency Communications; ***Hiroshi Takeo**, Peer Support Specialist; **Janie Marsh**, Mental Health America of Oregon

Guest:

Jared Hager, United States Attorney's Office

[* Indicates Committee Member was absent]

Updates & Notes

A reporter from the New York Times spent time in Portland learning about the Portland Police Bureau's layered response model to mental health including the BHU. During her time here she spoke to Shannon Pullen about the BHU Advisory Committee. She expresses an interest in speaking to other members of the committee. If you are willing to speak with her please let Shannon know and she will pass on this information.

January Minutes & Monthly Report

The January monthly report was reviewed. Prior to a motion to approve the report a committee member had another suggestion for the language that was changed in the January meeting. This suggestion consisted of using "and any of the following" instead of "and/or". This same sentence appears in both the Suicide Reference Guide (discussed in January) and the Mental Health and ECIT Dispatch Protocol Reference Guide (being reviewed today). The committee members agreed that the language should be consistent in both reference guides and that there should be a delay in approving the January monthly report until there was further discussion on the language used in this sentence.

Christina Nieves moved to delay approving the January report and that the language in both reference guides are consistent with whatever language the committee agrees to in this February meeting. Floyd Pittman seconded the motion, Melanie Payne abstained. The motion passed.

M/S/P

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The January minutes were discussed. Bill Osborn moved that the minutes be accepted and Christina Nieves seconded the motion. The motion passed.

M/S/P

The January minutes will be posted on the BHU website once approved.

Review of Bureau of Emergency Communications (BOEC) Policy

PO- Mental Health & ECIT Dispatch Protocol RG – 02122016

This Resource Guide (RG) covers triaging calls related to mental health issues. There was a very brief overview of how calls are taken at BOEC, how dispatchers get that call from a call taker and the steps they take to send out the appropriate response based on the call type. The RG describes the purpose of ECIT officers, lists instances of possible a mental health crises and gives examples of the behaviors that might be exhibited. In addition, the RG details how responders will be dispatched. The protocol also includes that ECIT officers will be sent out upon request.

There was a discussion on particular verbiage in some of the examples of mental illness experiences. The difference between “thought disorder” and “perceptual disturbance” is clinically two different things. “Feeling things” might be a mental health issue. While these differences might be necessary in clinical practice, BOEC is looking to find key words that will trigger the call taker to know the call might be a mental health related issue. At no time is BOEC attempting to diagnose a mental health issue.

Most people call 911 when they are having a major life event. The question was asked, “How does BOEC determine a catastrophic life event?” It was suggested that this needed more clarification in the RG. Possible examples to add could include, eviction, death, divorce, job loss, victim/witness of violent crime, etc. The committee also recommended changing “catastrophic” to “traumatic.”

It was asked, does the word “perceived” need to be in the definition of a mental health crisis? Can you have a mental health crisis without having a mental health illness? BOEC and the Portland Police do not want to diagnose. The bureaus use “perceived” because they don’t know why someone is acting as they are, but they want to respond appropriately to the current situation.

Calls do not always include a mental health component. The call could be more routine such as a caller reporting a theft. Even though the caller may be experiencing a crisis, this alone does not meet the criteria to dispatch an ECIT officer. However, when the officers arrive on scene and find a mental health component to the call, an ECIT officer may be requested. All officers have crisis intervention training. Policy needs to be wide enough to catch mental health issues, but not so broad that they catch all types of crisis.

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Portland Police Bureau establishes the policy that BOEC must follow for how calls will be dispatched. BOEC dispatches responders, based on these parameters. Therefore, the language of BOEC's dispatch protocol mirrors the Portland Police Bureau policy.

The DOJ is asking BOEC to gather data based on call types and track when an ECIT officer is on a call.

When BOEC receives a call, they dispatch responders based on the situation described (see #2 in the call taker section of the RG). Situations are organized by call type which gives a brief description of why officers are needed. As an example, a person hasn't seen their neighbor in three days. The car is in the driveway, newspapers are piling up and the caller is concerned. This type of call would be initially set up as a Welfare Check (WELCK). Another example is a person on the street is heard screaming. The caller does not know why this is happening, but it is creating a disturbance. The initial call type would be Disturbance (DIST). The RG directs the call taker to use the most appropriate call type based on the information given to them at the time of the call. Other general call types are Suspicious (SUSP), Unwanted (UNWNT), and Trespassing (TRESP). There is no longer a Mental Health call type. The community asked BOEC to discontinue its usage due to possible bias or mental health stigma by the responders. This has been discussed in depth with the DOJ.

BOEC's main priority is getting help started. There are situations when BOEC won't know that an ECIT officer is needed. The DOJ has met with Portland Police Bureau to identify when the responding officer should consider requesting an ECIT officer.

To clarify, district patrol officers are dispatched on all priority calls. When the information gathered indicates the need for an ECIT officer, one will be dispatched, if available. The ECIT officer is sent in addition to the initial responders.

The question was asked, "Are there certain situations that get an ECIT response right away"? Yes. When the call fits the dispatch protocol criteria, an ECIT officer will be dispatched, if available. If the caller requests an ECIT officer, one will be dispatched if available.

The process for dispatching an ECIT officer was discussed (see #4 in the Dispatcher section of the RG). BOEC dispatcher will check for an available ECIT within their assigned talk group. If none are available, then the dispatcher will ask other dispatchers to check their assigned talk groups.

Not every person with a known or perceived mental illness are in crisis. Moreover, not every call meets the criteria to get an ECIT or a district officer dispatched. BOEC occasionally speaks to callers who yell into the phone and hang up with no police response needed; a caller who only wants a medical transport are just two examples. BOEC provides information to the BHU if police respond to an address more than twice in a week. BOEC does not dispatch Project Respond, this is done by the Multnomah County Crisis Line.

The goal is to make sure there is an appropriate response/resource to each call.

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It is important to have an initial call type that describes the incident so that Portland Police can track how a call was generated. Part of the BOEC dispatch protocol requires the dispatcher to update the initial call type to 'ECIT.' This allows the Portland Police Bureau to run reports to analyze the number of calls when an ECIT officer was needed. Currently, BOEC has no easy way to tell who is an ECIT officer (it shows up on a different screen) but new forms of data collection are currently in the works.

The Mental Health and ECIT Dispatch Protocol RG and the Suicide RG reviewed by the committee in January includes the ECIT dispatch criteria. During the January meeting, the committee discussed clarifying the language that read "2. Dispatch an ECIT officer, if available, when a call involves a possible mental health crisis **and** the following".

The RG reviewed today reflects the recommendation to update the dispatch protocol to make clear when ECIT officers will be sent. The new language reads "2. Dispatch an ECIT officer, if available, when a call involves a possible mental health crisis **and any** of the following".

The committee accepted the updated language in this draft. Given the previous approved recommendation from Christina Nieves that both guides have consistent language, the Suicide Reference Guide should also contain the language presented in this guide.

The committee asked that BOEC change "Thought Disorders" to "Thought or Perceptual Disorder" and change "Catastrophic Events" to "Traumatic Life Events". Also, the committee suggested that "and then" be added to #1 in the Dispatcher section of the RG to ensure that ECIT officers are sent in addition to the district patrol officers.

Mary Lindstrand moved to make these changes and Floyd Pitman seconded the motion. The motion passed.

M/S/P

A reminder to the committee members, it would be very helpful for you to understand dispatching and call taking a BOEC if you sign up for a sit-along. Please contact Melanie Payne if you wish to do so.

ECIT observation & recommendations; Shannon typed up notes from the meeting where people shared their observations. She typed up what she had and passed them around. Please send her an email with your comments so that it's clear that is what you wanted said. How is it best to get these recommendations down to demonstrate to the DOJ what we have? What should this group recommend on the ECIT observations? How is the training going? Should the Training division come out and give an analysis on training and what is working?

**The next BHUAC Meeting will take place on
March 23rd at 2:00 PM at the Portland Police Bureau's Central Precinct, 11th Floor,
Behavioral Health Unit Meeting Room**