



To: Members of the Senate Judiciary Committee

From: Sheriff Shane Nelson, Deschutes County Sheriff's Office
Oregon State Sheriffs Association &
Oregon Association Chiefs of Police

Date: May 17, 2017

Re: Testimony in Support of HB 2175 & HB 2176

Mr. Chairman and Honorable members of the Senate Judiciary Committee. For the record, I am Shane Nelson, Deschutes County Sheriff. I'm here today on behalf of the Oregon State Sheriffs' Association and Oregon Association Chiefs of Police in support of these measures.

Nearly half of those arrested in Deschutes County for low-level crimes sought jail mental health services. In hospital emergency rooms in Central Oregon, one in three patients receives or has previously received behavioral health services. In both cases, these individuals are often repeat visitors to the jail or the emergency room. National Association of Counties states 17% of jail populations have serious mental illness and of that 17%, 72% have co-occurring substance abuse disorders. Collaboration between the Deschutes County Health Services Department and the Sheriff's Office seeks to address the burden on the jail and emergency rooms while providing needed behavioral health services to individuals with mental health conditions and substance abuse disorders.

With the establishment of a Crisis Stabilization Center Sober Station, individuals apprehended by law enforcement can be delivered to the center instead of being incarcerated or taken to the emergency room if they consent. Once they arrive at the CSCSS, they can receive direct services from behavioral health professionals. One million dollars in funding has been secured to construct a permanent facility. Additionally, funding has also been allocated to support a temporary facility until the permanent facility is constructed. A significant number of individuals detained by law enforcement have mental health conditions or substance abuse disorders. As part of the Deschutes County Adult Jail expansion, in September 2014, new space was added in an effort to address the needs of inmates with serious mental health issues and substance abuse issues. Many of these inmates were frequent offenders often arrested due to their behavior as a result of their mental health condition or substance abuse disorder. The Sheriff's Office has faced a growing number of inmates with mental health/substance abuse conditions resulting in unnecessary hospitalizations in the absence of other viable alternatives. Managing the time law enforcement is dedicating to this population in the community is an ongoing challenge. Hospital emergency rooms also find that a significant number of their patients have mental health conditions or substance abuse issues. The American College of Emergency Physicians (ACEP) report that emergency department boarding of individuals with mental health

conditions is virtually universal in the United States. Half of all emergency department doctors surveyed by ACEP indicated at least one psychiatric patient is boarded in their

emergency rooms every day.² A study by the Central Oregon Health Council found approximately one in three emergency department patients in Central Oregon were currently engaged in, or had past involvement with, either private or public behavioral health services. The study also indicated an additional 50% of patients could probably benefit from behavioral interventions including substance abuse treatment, pain management and/or traditional behavioral health services.³

In 2015, the Sheriff's Office and the Health Services Department began discussions to develop a comprehensive solution to address these issues. Crisis receiving centers and sober stations are two approaches showing promising results nationally. These centers treat the immediate issue for the individual, but also seek to take a broader, long-term approach to addressing the issues underlying the behavior. Over the ensuing several months, representatives from the Sheriff's Office and the Health Services Department toured facilities in the northwest region designed with this broader, long-term approach in mind. At the conclusion of the tours, a meeting with community partners was convened to develop a plan to proceed in addressing these challenges in Central Oregon.

Through this process, the Crisis Stabilization Center Sober Station (CSCSS) concept was created. This concept calls for diverting individuals with serious mental health conditions and substance use disorders from jail and the emergency room. These individuals will be delivered to a facility designed to provide mental health/substance abuse services. Located in close proximity to the County Jail and operated by behavioral health professionals, the intent of this center is to curtail jail recidivism and frequent emergency room visits from those with serious mental health conditions and substance abuse disorders. In the past, these issues have been handled in a very fragmented way, often only mitigating the immediate disruption without seeking to work with the individual to reduce this behavior in the future.

We cannot always save someone from themselves. Some vulnerable citizens face tragic consequences as a result of their own actions and in a litigious society like today, liability can hinder excellent collaborative and innovative efforts to improve communities. That is why this expansion of immunity for facilities such as ours is a blessing as we move forward to continue doing the right thing.

Thank you for your time and consideration.

Example: Inmate that has not been incarcerated for 160 days.

1 Mass incarceration: The whole pie, Wagner, P & Rabuy, B [2015] www.prisonpolicy.org

2 American College of Emergency Physicians. (2016). Physician poll on psychiatric emergencies.

3 Emergency Department Diversion, a collaborative community health integration project with outcomes that demonstrate the Triple Aim. Final Project Report: June 2010 -June 2011 (1/3)