

HB 2417: MOBILE CRISIS RESPONSE



06/25/2021
From the desk of
Sen. Sara Gelser

OREGON IS IN CRISIS

Oregon is in the midst of a behavioral health crisis. In Oregon, 15% of incarcerated people in state prisons have serious mental illness, meaning there could be as many as 2,298 Oregonians in prison due to their history with mental illness and their inability to access the services they need. People with mental health diagnoses are 50% more likely than other Oregonians to have violent run-ins with the police. Police officers are often not equipped with the appropriate tools and training to address a person in a mental health crisis. **Oregonians need a consistent, statewide system of behavioral health crisis care that offers a response that is rapid, effective, consistent and linguistically and culturally appropriate to save lives.**

MOBILE CRISIS RESPONSE

HB 2417 administers funds to cities and counties to implement mobile crisis response units to respond to behavioral health crises. If an emergency call is determined to be nonviolent, dispatchers would direct the call to the local mobile crisis response program. The mobile crisis team would then deploy a crisis worker and a medic to assess the situation, provide immediate stabilization, and connect individuals to treatment services. Currently, the CAHOOTS program, an existing mobile crisis response model which helped inform this bill, responds to nearly 20% of Eugene and Springfield's 9-1-1 calls, **saving the cities millions of dollars annually from emergency room and jail costs.**

9-8-8

HB 2417 establishes a statewide system of crisis response linked to a 9-8-8 call center, integrating first response through the mobile crisis response units mentioned above, and including crisis stabilization and follow-up care for Oregonians experiencing behavioral health crises.



PLEASE VOTE YES ON HB 2417