



## Marion County Crisis Programs

**Psychiatric Crisis Center (PCC):** 24/7 walk in crisis center, staffed by 7.5 FTE regulars Master's level Mental Health Professionals and another 15 to 25 temps that fill in for vacation and sick. Primary purpose is to provide an assessment for hospitalization and mental health crisis issues to anyone who perceives themselves to be in crisis.

**Crisis Respite:** 24/7 Crisis intervention program, works in tandem with PCC. Individuals in crisis are evaluated and a plan to address and alleviate the presenting crisis issues is created. The program is staffed by on call Bachelor's level Mental Health Associates. We have three community homes that open up their spare bed to those in crisis, as well as three two-bedroom apartments. The staff also provide transportation and coordination of services to resolve the presenting crisis issue, accessing outpatient providers, appointments, facilitating difficult phone calls, accessing medications or prescriber appointments. Last fiscal year Marion County provided 658 respite interventions.

**Emergency Dept Diversion for Children:** This program is designed to move children with needs for a higher level of care out of the Emergency dept at Salem Hospital and into community services while waiting for a placement. Marion County partners and contracts with Community Counseling Services, and Oregon Family Support Network to provide community crisis respite to children and services while awaiting placement or diverting from higher levels of care.

**Brief Resource Enhancement and Support (BRES):** These programs were designed to provide individuals in our community who were having difficulties being engaged and connected to outpatient and community services, case management and support, as well as stabilization toward community resources. Each program has a Case Manager and access to the Crisis Associate staff for skills training. They also share the resource of limited Transitional Housing (three two-bedroom apartments).

**BRES:** Specifically designed for person revolving through the acute care system, Emergency Room, PCC or the Salem Hospital Psychiatric Medicine Center. The program served 61 individuals last year.

**BRES J:** Jail Diversion, works in conjunction with our Law Enforcement Collaboration teams, goes into the jail, and takes referrals from our Crisis Outreach Response Team, Mobile Crisis Response Team, the Jail Mental Health staff, and the 370 case manager. The program includes aggressive community case management, which includes going to local shelters and bridges to locate individuals that have been referred to the program. The program served 109 people in the community, monitored and engaged another 97 in the jail.

**BRES A:** Aid and Assist Case manager, Marion County, in the past, has the dubious distinction of having the second highest 370 population at the Oregon State Hospital (OSH). This is largely impacted by the presence of several state institutions located in our county. The goal is to engage those who do not have outpatient treatment into services and to keep others connected to existing services. This program served 87 individuals in the community and monitored another 65 as they went through the restoration process at OSH.

**BRES X**: This represents the 16 hours a week of crisis prescribing available in the office. Last fiscal year this service provided crisis prescribing for over 600 individuals.

**Collaborative Assessment and Management of Suicide (CAMS)**: This team of 1.2 Mental Health Professionals was established in Jan of 2015. The program was established in connection with WVCH and offers next day appointments for individuals distressed with chronic suicide thoughts that are not referred to an inpatient unit.

**Civil Commitment Team**: 1.25 FTE for investigations of Hospital Holds and Petitions.

**Law Enforcement (LE) / Mental Health (MH) Collaboration Teams**

**Jail Mental Health**: Includes 1.2 FTE Mental Health Professionals and 1 FTE Mental Health Associate, This team provides mental health evaluations, responds to inmate mental health requests, coordinates inmates to see the Mental Health Prescriber in the jail, performs suicide risk evaluations, and performs case management / coordination of services for the inmates at the Marion County Jail, seven days a week, at least 8 hours a day.

**Crisis Outreach Response Team (CORT)**: Created in 2010, 1 FTE Mental Health Professional, 1 FTE Sheriff's Deputy, this team receives police reports from all 12 LE agencies in the county that have any reference to mental health issues involved in the LE interaction. They evaluate for safety and opportunity to connect with someone and then go out and cold call on persons in the community. They have about a 85% success rate of getting people to open the door and listen to their offer of services. They work to engage the person into a discussion of what is creating the contact with law enforcement. Then the team works to give them resources and referrals to divert them from further law enforcement contact.

**Mobile Crisis Response Team (MCRT)**: This team was created in 2014 with Oregon Health Authority (OHA) reinvestment dollars. There are 3 teams, each made up of one Law Enforcement Officer (Salem PD & Sheriff's Deputy) and one Mental Health Professional (PCC). They are stationed in a patrol car, 2 teams have a 4 day a week, 10 hour shift, from 1400 to 0000, and overlap one day a week. The third team works days Monday through Friday starting at 0800, all teams respond to 911 / dispatch calls.