

AGENDA

Lincoln County Local Public Safety Coordinating Council (LPSCC)

September 29, 2017

**Western Title Building on Hwy 101
Paula Sampson Room (Lower Level)
255 SW Coast Hwy, Newport
10:30 a.m. – 12:00 p.m.**

Meeting called by Guy Greco

Attendees: See Sign-In Sheet

10:30 a.m. – 11:00 a.m.	Update/Presentation re Sequential Intercept Mapping (See attached August 2017 Monthly Report and Lincoln County, OR Strategic Action Plans)	Steve Sparks
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11:00 a.m. – 11:15 a.m.	Update/Presentation re Pre-trial Justice Training	Guy Greco
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11:15 a.m. – 11:30 a.m.	Eclipse Debriefing Opportunity for members to share thoughts and comments on Eclipse Day preparations and executions	LPSCC Members
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11:15 a.m. – 11:55 a.m.	Member Updates	LPSCC Members
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11:55 p.m. – 12:00 p.m.	Wrap-up Any Next Meeting Topics?	Guy Greco
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NEXT MEETING:	Friday, December 1, 2017	Guy Greco
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Stepping Up Initiative August 2017 Monthly Report... September 1, 2017

By Steve Sparks, Project Consultant, Lincoln County Oregon, Board of Commissioners (BOC)

Introduction

Quality preparation for the GAINS Center, Sequential Intercept Mapping (SIM) workshop on August 29/30 paid big dividends! The attendance and participation far exceeded expectations. Most importantly, everyone who attended the workshop came ready to be engaged in a meaningful way. Everyone who has been involved in the leadership and planning for the Stepping Up Initiative and the SIM workshop planning this past year are just outstanding and professional in every respect. We are well positioned to move forward with the post SIM priorities voted by participants during the workshop. I will review these critical actions in this report, especially the top priority, intercepts 0-1.



Sequential Intercept Mapping (SIM) Action Priorities for Change

1. Establish Intercept 0-1 diversion, including mobile crisis response, peer services, tri-county partnerships, etc. (17 votes)
2. Establish Intercept 2 diversion through pre-trial services/intervention (14 votes)
3. Increase cross-Intercept peer-delivered services and provide education regarding justice involvement (11 votes)
4. Provide formalized reentry planning in Intercept 4 (i.e., closed loop referrals) (10 votes)
5. Establish/increase supportive housing for individuals with mental illness (7 votes)
6. Increase Intercept 1 diversion options for law enforcement (both voluntary and involuntary) (6 votes)
7. Provide cross-training across Intercepts (6 votes)
8. Establish Medication Assisted Treatment (MAT) in the area (4 votes)
9. Provide more timely access to services upon reentry (3 votes)
10. Enhance recruitment and corporate housing for mental health staff across agencies (3 votes)

11. Increase awareness and screening of gambling disorders and training/referrals to treatment (3 votes)
12. Enhance care coordination model for community services in Intercept 0 (3 votes)
13. Provide a faster handoff from law enforcement to the hospital, reducing wait times for officers (2 votes)
14. Enhance cross-Intercept utilization of data and technology (1 vote)

What now?

The GAINS Center, Policy Research Associates, workshop facilitators, Travis Parker and Ashley Krider will prepare a detailed Sequential Intercept Map (SIM) tailored after the workshop outcomes presented as priorities above. We have very detailed and measurable post SIM forward actions developed in breakout groups during the 2nd morning of the workshop. In the coming weeks and months, the breakout work teams will continue to be engaged in the process. The excellent professional support from Policy Research Associates and facilitators, Travis Parker and Ashley Krider, will continue as we implement a sustainable strategic plan for Lincoln County that includes participation and collaboration from tri-county partners, Linn and Benton Counties, Samaritan Health Services Hospitals, Samaritan IHN-CCO, and a diversified group of community treatment stakeholders. All are dedicated to building a community treatment continuum that addresses the larger needs of jail diversion, jail re-entry transition, mobile crisis response and peer support services. After the workshop, it was abundantly clear that we are all on the same team.

Establish Intercept 0-1 diversion, including mobile crisis response, peer services, tri-county partnerships, etc. (17 votes)

For starters, we are launching immediately into the highest priority action identified for intercept 0-1. In the near term, my role as project consultant will focus on orchestrating the forward progress of intercept 0-1. Lincoln County was awarded an OHA mobile crisis response grant over a year ago that has become a severe challenge to execute because of our inability to recruit and retain qualified crisis response clinical professionals to staff the 24/7 needs of a mobile crisis response business model. The 0-1 intercept breakout group spent considerable time discussing this problem, the broader complexities, and implications. We agreed to move to a higher-level post SIM workshop action by engaging tri-county partners and other stakeholders in this effort to find solutions for Lincoln County, and potentially drive a stronger regional collaboration. The peer support services component offers opportunities for scale, leverage, and staffing a more regionally focused mobile crisis response business model. CHANCE, <https://www.chancerecovery.org/> a peer services and support non-profit from Albany, is committed to supporting this effort and have in place existing peer services contracts with both Linn County and the IHN-CCO. Our goal is to maximize the potential of peer support and services in Lincoln County going forward. Also new in Lincoln County is Powerhouse Residential Treatment <https://www.powerhousetreatment.com/> opening soon in Otis. We have already started early discussions with Powerhouse to bring them into the Stepping Up Initiative mix. Also, on the table for discussion is a peer support and services criminal justice model in the State of Montana, Montana Peer

[Network](#), "Peers as Crisis Service Providers," from SAMHSA. There is a strong business case and outcomes in the Montana model that could be considered and replicated in the LBL tri-county. Reference the Montana business case... <http://mtpeernetwork.org/wp-content/uploads/2014/03/White-Paper.pdf>

Future Funding Opportunities

As we all know, the funding environment is highly competitive. The Stepping Up Initiative, especially the completion of the highly regarded SAMHSA GAINS Center Sequential Intercept Mapping (SIM) platform, will open funding opportunities for Lincoln County and LBL tri-county that we were previously not prepared to compete effectively and win support from diversified funding sources. One such example we are looking into right now is the [Laura and John Arnold Foundation RFP](#), just released. We now know that private foundation funding is very much in the mix as we build a competitive public private partnership business strategy.

Outreach

My work continues to include high-level interactions with community stakeholders and tri-county partners to strengthen collaborations and build awareness. Commissioner Hall and Sheriff Landers along with other team members have joined me consistently in various community venues, meetings, and radio programs to spread the word. We are receiving much more media attention as well. We are attracting more volunteers and attention from higher education. Keith Nelson, a retired IRS/DOJ professional has been volunteering his skills on baseline data collection and connecting Lincoln County to higher education resources at [Washington State University, Criminal Justice](#), in Pullman and potentially OSU. Shelby Houston, a [Creighton University](#) graduate student, is completing her practicum with Lincoln County Community Justice and Probation under the guidance of Suzi Gonzales and Jennifer Landers. LPSCC MH subcommittee, MHAC and APARC advisory groups are very important forums as well. I personally and professionally enjoy the outreach role very much and appreciate the opportunity to reach out to our broader community.

Summary

As your Stepping Up Initiative project consultant, I couldn't be more pleased with the leadership commitment and support this past year since the Lincoln County Board of Commissioners passed the Stepping Up Initiative Resolution on October 5, 2016. I have been able to do this work at a very high professional level with very few roadblocks. The wind is at our back as we move forward with the post SIM workshop action plan. We have the passion and motivation among all stakeholders to move to a sustainable business plan.

Respectfully submitted,

Steve Sparks

Lincoln County, OR Strategic Action Plans

PRIORITY AREA 1

ESTABLISH INTERCEPT 0-1 DIVERSION, INCLUDING MOBILE CRISIS RESPONSE, PEER SERVICES, TRI-COUNTY PARTNERSHIPS, ETC.

Objectives	Action Step	Who	When
Hire 2-4 crisis counselors and 4 mental health counselors	1. Identify what works/doesn't work regarding recruitment	1. Steve Sparks, HHS HR Director, Mental Health HR	Hiring staff: 1/1/18
	2. Work with county pay structure to create a pay differential; increase crisis funding when COLA increases	Director/management staff, checking with other counties to see what is/isn't working	Next six months: HR workgroup (with Steve), telepsychiatry
	3. Work with colleges/universities to draw upon interns and new graduates	2. HHS Director, BOC, Mental Health Division Director, LCEA, checking what is working across county departments	
	4. Organize a work group with HHS, Chamber, hospitals, BOC, and schools to address the lack of staff housing	3. Gina McCrea, Diane Nelson/WSU, human resource managers, HHS Director, Mental Health Division Director	
	5. Increase use of telepsychiatry in emergency departments; use of video technology for after-hours crisis workers	4. Steve Sparks, Wayne/LC Legal Office/BOC, David Bigelow, school administrators	
	6. Work with Lincoln County Jail	5. Justin/Linn County, Jaimie	

Objectives	Action Step	Who	When
	<p>and HHS to determine potential departments where crisis staff can be hired</p> <p>7. Create a workgroup to look at additional types of positions to address individuals presenting in primary care (behaviorists, navigators, non-traditional health workers, Peer Support Specialists, recovery mentors)</p>	<p>Russell/LC Jail, Marie Laper, LCMH Program Managers, staff?, Samaritan staff/admin/IT, county IT?</p> <p>6. Jamie, Barbara T.</p> <p>7. Workgroup- Bill Bouska, Linda G./Legal Aid, Marie L.</p>	
<p>To reduce contacts between law enforcement and individuals with mental illness</p>	<ol style="list-style-type: none"> 1. Reduce referrals of individuals with mental illness to jail 2. Increase participation of Peer Support Specialists and Recovery Mentors with law enforcement 3. Increase knowledge of emergency department staff regarding mental health 4. Hire/recruit for mobile crisis counselors and mental health counselors 5. Reduce referrals to local emergency departments from individuals in a mental health crisis 		

PRIORITY AREA 2

ESTABLISH INTERCEPT 2 DIVERSION THROUGH PRE-TRIAL SERVICES/INTERVENTION

Objectives	Action Step	Who	When
Develop a qualitative and objective evaluation	Research existing models Poll stakeholders: judges, attorneys, county/city government	Pretrial services subcommittee	1/1/2018 (complete)
Create program guidelines for pretrial release	Convene treatment team: judges, attorneys, community corrections, providers, peers Gather data/needs assessment	Pretrial services subcommittee	2/1/2018 (start)
Increase capacity to provide services that are not in place	Housing/master lease concept	Lola/Laulori/Jeff (Chance)	3/1/2018 (complete)
Determine financing needs and capacity	Evaluate individual and project financial capacity Provide a formal business plan Outreach to existing providers, funders, community stakeholders Find opportunities for peer support	Suzi/Jenn Pretrial services subcommittee	September 30 th (start research) Continual by January 1, then ongoing (Health Share- Arnold Samaritan INH-CCO)
Determine implementation timeline	Gather funding, hire (TA grants?) Determine oversight(s)	Pretrial services subcommittee	Start 2/1/2018

PRIORITY AREA 3

UTILIZE ROBUST PEER-DELIVERED SERVICES AND PROVIDE EDUCATION RE: JUSTICE INVOLVEMENT

Objectives	Action Step	Who	When
Cross-intercept list of Peer Support Specialists	Create multi-agency list of PSS: each PD, each ER, jail, dispatch, mental health, substance use treatment services	Chance	ASAP
Education for all players in Intercepts 0-1 and the community	Connect trainer to agencies and offer more training	Hillary Harrison/Sam THW Workgroup/IHN	10/11/17
Connect PSS to peers/consumers in Intercept 1	Increase the pool of PSS Offer more trainings in LC	Chance	ASAP
PSS perform jail in-reach, brief screenings, and data matching in Intercept 2	Refer to agency as needed Referrals for assessments UCC/Workgroup at IHN	IHN staff and community members	9/15/17
Intercept 3: PSS visit in jail, attend court hearings, and are involved in Drug Court	Help facilitate communication with jail staff Embed in court for moral support	PSS list to everyone	ASAP
Intercept 4: Facilitate housing, Access medication, and Keep appointments	PSS make calls per counselors Call doctor, (ROI) pharm Offer rides, confirm appointments, assist with bus tickets/taxis	PSS and client	Ongoing
Intercept 5: Work with PO's closely, Supported Employment search, Access benefits	ROP I to PO and county; MAT Resume, clothing, education/GED, mock interviews Drive, paperwork, internet support	PSS	After jail-ongoing

PRIORITY AREA 4

PROVIDE FORMALIZED REENTRY PLANNING IN INTERCEPT 4

Objectives	Action Step	Who	When
Map resources and contact person updated	Update resources and identify contact person in each agency	Contact Rick Walter and Jody Moroney (Julie will contact them)	1-2 weeks
Start doing personal needs assessments of identified individuals (approx. 30 individuals who are jail inmates) prior to release	Identify basic areas of need to address: medication, housing, transportation, ID cards, food stamps, medical, etc. Formal internal process for volunteers to notify corrections staff of inmates' needs Formal printed discharge plan which includes dates/times of appointments (e.g., pep, veterans, mental health). Include list of available resources: food transportation, etc. Get this on a form printed by the computer (like AUS at the hospital) with a 2-way flow of medical information	Medical team at jail; Buckmaster Jerry Flores will be the point of contact for resource pivoting at 541-265-8891x343 OHP intake staff Contact re: IT connectivity	Already done January 2018