

Department: Health Department **Program Contact:** Christa Jones**Program Offer Type:** Existing Operating Program **Program Offer Stage:** As Proposed**Related Programs:****Program Characteristics:****Executive Summary**

As a function of the Local Mental Health Authority (LMHA), the County's Commitment Services are delivered to individuals who are receiving mental health treatment on an involuntary basis. This includes the investigation of Notices of Mental Illness (NMIs) by the Involuntary Commitment Program (ICP), Post-Commitment and Trial Visit services, management and reduction of long term care referrals to the Oregon Health Authority (OHA), and payment for involuntary hospital stays for indigent individuals. Services apply an equity lens, utilizing culturally specific positions and culturally responsive ideals to protect the civil rights of vulnerable individuals. Staff also serve as advocates, highlighting the adverse impact of dominant culture treatment design, laws and systems on the lives of Black, Indigenous and People of Color communities.

Program Summary

Commitment Services consists of interconnected pre and post commitment services: Under pre-commitment services the ICP employs certified commitment investigators to evaluate individuals who are involuntarily detained in hospitals and are alleged to be a danger to self/others or unable to provide for their basic personal needs due to a mental disorder. ICP investigators make recommendations to the court about whether or not a person alleged to be mentally ill should be civilly committed. If a person is recommended for civil commitment, the law requires that a certified examiner conduct further evaluation of the individual during a civil commitment hearing. When a person is civilly committed they are transferred to post-commitment services so their care and treatment may be monitored by the CMHP. The commitment monitors make care recommendations, facilitate referrals to long term care, and liaise with other County programs. When a civilly committed person is discharged to the community while remaining under committed status this is called a trial visit. Trial visit staff monitor a committed person's adherence to community based care to enhance individual and community safety while reducing the need for further inpatient mental health treatment. Commitment Services programs include culturally specific roles, including roles to address and respond to the needs of Black/African American and Vietnamese and Japanese individuals.

Long Term Care Waitlist Reduction Program (WLRP) funding provides Intensive Case Management (ICM) for committed persons discharging from inpatient care. ICM and transition planning helps prevent relapses into hospital care and reduce the County's burden as the payor of last resort. ICM staff provide a connection with resources and assistance in obtaining housing, access to health care, social services, and outpatient mental health services. These services address the needs of mentally ill county residents at the highest level of care. Services provide care & service coordination by matching the client's culture, identify and service needs with available resources and ensuring protection of legal and civil rights. The WLRP also funds 3 Emergency Department liaisons who connect with individuals in mental health crises who are presenting to hospital emergency rooms. These liaisons connect individuals to appropriate community based services to divert them from costly inpatient care.

Performance Measures

Measure Type	Primary Measure	FY21 Actual	FY22 Budgeted	FY22 Estimate	FY23 Offer
Output	Total number of NMIs	2,762	2,900	2,659	2,700
Outcome	% of investigated NMIs that did not go to Court hearing ²	80%	79%	80%	80%
Outcome	% of investigated NMIs taken to court hearing that resulted in commitment ³	87%	90%	84%	90%
Output	# of commitments monitored annually (4)	355	390	324	350

Performance Measures Descriptions

¹This includes NMIs for indigent residents and residents with insurance.²Measure staff effectiveness in applying ORS 426 and reducing burden on the system.³The decrease in FY22 is a result of new arguments for dismissal and changed rulings by the court, these are actively being managed to increase %.⁴ # reflects new & existing commitments of residents in acute care settings & secure placements.

Legal / Contractual Obligation

ORS 426 requires that all persons placed on a notice of mental illness be investigated within one judicial day, as well as monitored upon commitment, as a protection of their civil rights. The state delegates the implementation of this statute to the counties.

Oregon Health Authority Intergovernmental Agreement for the Financing of Community Additions and Mental Health Services.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2022	2022	2023	2023
Personnel	\$1,132,205	\$2,401,662	\$1,178,312	\$2,497,990
Contractual Services	\$229,710	\$155,343	\$234,285	\$255,343
Materials & Supplies	\$1,899	\$43,320	\$9,444	\$43,992
Internal Services	\$198,680	\$367,628	\$361,668	\$170,628
Total GF/non-GF	\$1,562,494	\$2,967,953	\$1,783,709	\$2,967,953
Program Total:	\$4,530,447		\$4,751,662	
Program FTE	8.00	16.10	8.00	16.10

Program Revenues				
Intergovernmental	\$0	\$2,967,953	\$0	\$2,967,953
Total Revenue	\$0	\$2,967,953	\$0	\$2,967,953

Explanation of Revenues

\$ 2,967,953 - State Mental Health Grant: MHS 24: Acute & Intermdt Psych - Commit

Significant Program Changes

Last Year this program was: FY 2022: 40072 Mental Health Commitment Services

The pandemic and various community challenges have resulted in continued increase in clinical acuity across the communities serviced through Commitment Services. This, coupled with continued isolation, increased substance abuse, community and interpersonal violence, along with service provider closures, have put immense pressure on the behavioral health system. Providers have had to prioritize essential services and responding to crises and ever-changing challenges which has, in some cases, impacted their ability to collect and report data in a timely manner.