

- People who suffer from mental illness should not be locked up in jails and institutions, isolated from society, and exposed to conditions and circumstances that increase their risk of experiencing a mental health crisis. For too long this state has relied on police, jails, and others in the criminal justice system in lieu of evidence based therapeutic interventions to treat Oregonians living with mental illness.
- Serving individuals with mental illness in the most integrated, community based system of care to meet each individual's needs is not only required by the Americans With Disabilities Act, but community based care is proven to be more effective AND less costly than institutional based care.
- In 2010, my office, along with the Department of Justice Civil Rights Division, began an investigation of the State under Title II of the ADA. We met with numerous stakeholders including advocates, providers, peer support specialists, and law enforcement. What we found was there is a resounding consensus that an array of community-based support services for those living with serious mental illness is a must to prevent and, when necessary, to assist in, a crisis situation is absolutely essential.
- A little more than a year ago, at the request of Governor Kitzhaber, we gave the State a blue-print of what should be included in an array of community services to assist them in achieving success in their healthcare transformation.
- It is up to the State, to ensure that money is allocated to fund this array of community base services to fix our broken and fragmented mental healthcare delivery system. We will not close our investigation until the outcomes show real difference being made in areas like rates of police initiated mental holds, jail stays, access to services, and integrated housing options.
- Historically Oregonians with Serious and Persistent Mental Illness have entered the State's mental health system through expensive and segregate settings such as in-patient psychiatric facilities, emergency rooms, and jails, because of the failure to develop adequate community-based mental health services.
- Individuals experiencing a mental health crisis in Oregon have not had adequate resources such as mobile crisis teams, crisis walk-in or drop-off centers and crisis apartments throughout the state. Instead law enforcement has been often the first responder, and the officers have had few, if any, options other than to take an individual to jail or an emergency room, resulting in a rotating door in and out of the criminal justice system.
- And while I commend well meaning jurists and others who seek to fill the gaps and address this broken system through innovative approaches like mental health court, we have to create a system that understands that lawyers, judges, jailers and police are not the people with the proper training, or expertise to adequately address this complex issue.
- This fragmented system has taken individuals away from their homes and communities, not only placing them in expensive congregate settings, but also perpetuating unwarranted assumptions that such individuals are incapable or unworthy of participation in community life. The blue-print we have provided the state will save the state money and save communities.
- The plan has been stamped with approval by providers, advocates, peer support specialists, and law enforcement. And it was created, not by lawyers, but by nationally renowned experts with experience in helping to make system change -- and in collaboration with state officials.
- Key features of the plan include:
 - Community based support and services such as: Assertive Community Treatment Teams, Intensive Case Management, peer support services, and supported employment to help keep people out of crisis.
 - Stable supported housing, the foundation around which individuals recover from mental illness.
 - Early Intervention Services while the state's system has had success in identifying and treating young adults, preventing their illness from degenerating to the point of needing higher levels of care, the program is not available throughout the state, leaving many young adults at risk for entering jails, ERs, and hospitals.
 - Quality management that works proactively to identify service gaps and ensures an adequate capacity of and access to necessary services. We must be able to identify what, where, and how its communities provide services, and address the gaps.
 - Finally the state must maximize any available Medicaid matching funds. Notably, the state hospitals are funded largely by state general funds, whereas many community based supports and services are eligible for a Medicaid match. The state must move its system to a community based system, with an adequate array of services, and release its reliance on state funded institutions which are draining state resources and our communities.
- I am optimistic that this process will improve the lives of thousands of Oregonians living with mental illness.