COMMUNITY OUTREACH AND EDUCATION

JCMH receives frequent requests to deliver presentations to community groups about behavioral health needs and services. JCMH staff have presented to the following groups:

- Asante/NAMI Mental Health Forum
- Community Care Project
- County Public Forum (Sheriff's Office)
- Foster Parent Training
- Jackson Care Connect CCO
- Local Alcohol and Drug Planning Committee
- Mental Health Advisory Committee
- National Alliance on Mental Illness:
 Family to Family
- Oregon Pain Guidance
- Public Safety Coordinating Council
- Public Safety Coordinating Council Mental Health Task Force
- Rogue Community College
- Southern Oregon Success Advisory Council
- Southern Oregon University various classes in Human Services and Counseling programs
- TIC Steering Committee
- Traditional Healthcare Workers Course (RCC)
- Vocational Rehabilitation

Jackson County Mental Health (JCMH) is the designated Community Mental Health Program (CMHP) and the Local Mental Health Authority (LMHA) for Jackson County. Through this designation, JCMH provides medically necessary mental health services to children and adults with severe or chronic psychological or emotional problems, with direct responsibility for the indigent population. JCMH helps individuals resolve crisis situations, develop skills to improve their functioning in daily life, and reduce criminal justice involvement. Utilizing a recovery model, it supports individuals with serious mental disorders to sustain stable lives in the community. Additionally, JCMH provides mental health promotion and prevention. JCMH is the safety net for the community and will continue to deliver services as outlined in the Inter-Governmental Agreement (IGA) with the Oregon Health Authority (OHA).

EVIDENCE BASED PROGRAMS

ASIST Training: ASIST (Applied Suicide Intervention Skills Training) is a two day suicide prevention training designed for counselors, teachers, mental health specialists and other gatekeepers who want to feel more comfortable, confident and competent in helping to prevent the immediate risk of suicide. ASIST is recognized as an Evidence-Based Practice by the state of Oregon.

Mental Health First Aid: Certified staff members offer Mental Health First Aid to community partners throughout Jackson County as part of JCMH's prevention efforts. The interactive 12-hour course provides an overview of mental illness and substance use disorders in the U.S., introduces participants to risk factors and warning signs of mental health problems and reviews common treatments. In addition to our adult trainers, Jackson County Mental Health has a certified adolescent Mental Health First Aid Trainer. These staff, in collaboration with the two certified instructors at the FQHC, will continue to offer trainings across the County.

Suicide Prevention (Garrett Lee Smith): Jackson County is partnering with the Oregon Health Authority on a federal grant (FY 14-19), with an expansion grant (FY 20-22) to reduce suicide among youth aged 10-24 through implementing comprehensive suicide prevention and early identification practices. A full-time suicide prevention coordinator is dedicated to increasing gatekeeper training, facilitating training for clinicians, improving the continuity of care, and improving data collection.

Wellness Action Recovery Planning (WRAP): WRAP is an evidenced-based, trauma-informed model for personal wellness and recovery rooted in the principals of self-determination and empowerment. It encourages and provides participants with the tools they need to be more involved and proactive in their own wellness and success. Jackson County Health and Human Services (HHS) has enlisted WRAP as a transformative recovery tool for staff, clients, family members, supporters, partners and our community as a whole.

PREVENTION COALITIONS

Substance Abuse Prevention Coalition: The Jackson County Substance Abuse Prevention Coalition utilizes the structure of the Strategic Prevention Framework per the expectations of the Oregon Health Authority. The purpose of the coalition is to collaboratively address and reduce alcohol, tobacco, other drug, and gambling problems among Jackson County youth. The primary goal of the coalition is to utilize the Strategic Prevention Framework to address alcohol abuse among youth as well as other focus areas as determined by the coalition. Coalition members include stakeholders from across multiple community sectors including healthcare professionals, religious organizations, parents, schools, youth-serving organizations, local government, and treatment organizations.

Youth Suicide Prevention Coalition: The Jackson County Youth Suicide Prevention Coalition is a community based, volunteer membership organization comprised of representatives from public secondary schools and colleges, hospitals, non-profits, community organizations, Juvenile Justice, Mental Health, Veteran's Services, and local volunteers. The mission of the Coalition, available on our website at http://suicidepreventionjacksoncounty.com/, is to raise awareness of the problem of suicide in our county, reduce the incidence of suicide and suicidal behavior of Jackson County youth, and provide support for all those affected by suicide. The group keeps a comprehensive list of community resources and announcements on the website, as well as a Facebook page, (http://www.facebook.com/pages/Jackson-County-Youth-Suicide-Prevention-Coalition/140443226004431).

CRISIS AND STABILIZATION

As part of our CMHP responsibilities, Crisis Services are available through JCMH 24 hours a day, 7 days a week. Services include mobile crisis response with law enforcement, assessments, referrals, pre-

CRISIS INTERVENTION TRAINING

The goal of Crisis Intervention Training is to train and certify a cadre of law enforcement officers and mental health staff to respond to individuals with mental health issues in a more positive, less threatening way. The training is a full 40 hours delivered within a single week and includes educational presentations from over 10 different constituencies and community agencies, with a strong emphasis on individuals with mental health challenges; a visit to the behavioral health unit; an opportunity to role play scenarios; and a certification test at the end.

Within the past five years, JCMH has provided 10 CIT academies to over 186 law enforcement officers from all jurisdictions across the county.

The CIT planning committee continues to work to offer the academy to officers and other first responders.

commitment services, discharge planning, and a range of drop-in support and community resource groups. Services are available to everyone regardless of age, insurance status, Veteran's status or county of residence. Nearly 5000 individuals per year receive services through JCMH's Crisis Program, an estimated 1900 of whom are indigent, i.e., lack Medicaid or any other form of insurance coverage. Points of access include the walk-in clinic at 140 S. Holly in Medford, telephone referrals through local hospitals, police and social service agencies, and the after-hours hotline (541-774-8021).

<u>CATS Program - Emergency Department Diversion for Children and Youth:</u> JCMH receives dollars from the state of Oregon to provide diversion services for children and youth that are taken to the Emergency Department at local hospitals for psychiatric and behavioral crises. Services are immediate and delivered in the home and in the community to assist in providing stabilization services and assisting the families in getting the children and youth established in services.

<u>Living Room</u>: The "Living Room" program opened in July, 2016. This is a program designed to offer individuals in crisis an alternative to obtaining services in an emergency department. The Living Room is a research-based model offering a person-centered, non-medical environment staffed by peer specialists and professionals who are available to help clients de-escalate and avoid hospitalization, and is part of the crisis continuum.

<u>Mobile Crisis:</u> JCMH now has a law enforcement only back line, which allows local law enforcement to call for response with a crisis worker, when a mental health situations arises. This has proven to be very effective and has had some positive outcomes for the individual to engage in appropriate treatment options rather than being taken directly to the emergency room or incarcerated.

Pre-Commitment Investigations and Commitment Monitoring: JCMH is responsible as the Local Mental Health Authority to conduct pre-commitment investigations for individuals placed on a mental health hold to determine if the individual meets criteria for civil commitment. Investigations include interviews with police, family members, medical and behavioral health providers, and/or any other individual who holds information that maybe pertinent to a decision. Outcomes of the investigation include one of three options: the hold is dropped, the hold is extended (14 day diversion) or a commitment hearing is scheduled. Investigators work directly with an Assistant District Attorney who specializes in legal issues for individuals with mental health issues.

CHILDREN'S TREATMENT SERVICES

With the changes in the mental health service system in the county, services to children and youth have drastically changed and JCMH has had a large reduction in the number of children that we serve. JCMH continues to provide services to indigent and uninsured children and youth and some limited services (WRAP and EASA) through a contract with Jackson Care Connect. JCMH does not serve any AllCare children or youth in ongoing services. Access to services occurs through an initial assessment. The assessment will establish a diagnosis, if appropriate, and the appropriate level of care, and the child will then enter into treatment planning for outpatient care or receive a referral to a more appropriate resource.

Parent-Child Interaction Therapy CENTER OF EXCELLENCE

P-CIT is an evidence-based treatment for children 2-8 years old with social-emotional and behavioral problems that places emphasis on improving the quality of the parent-child relationships and changing parent-child interaction patterns.

In 2014, JCMH was named the Oregon P-CIT Center of Excellence and charged with training all P-CIT providers across the state. JCMH currently employs two nationally certified trainers.

Studies show that P-CIT reduces depression in mothers and reduces overall family stress; improves prosocial behavior and emotional regulation; and improves speech and language skills, among many other things. A new space has been designated for this program, designed with input from program experts.

Children's WRAP: Jackson County utilizes the National Wraparound model and is part of the Statewide Children's Wraparound Initiative as one of the three demonstration sites. Jackson County Wraparound is an intensive, integrated, holistic method of engaging children, youth, and their families with complex needs in a planning process. The primary goal is to keep children living in their homes and communities safely. The wraparound team takes a strength based approach and develops a plan that focuses on the priority needs as identified by the youth and family. The current project focuses on children in the custody of DHS Child Welfare or children who have behavioral, emotional, and/or mental health conditions severe enough to warrant direct entry into the service system at a high level of care. Jackson Care Connect has contracted with JCMH to serve 45 children and youth in the WRAP program.

Medford Drop (Young Adult Hub): Originally funded through a grant offered through OHA, these dollars now come to JCMH through the IGA and are passed on to Youth ERA Oregon (formerly Youth M.O.V.E Oregon) The purpose of this project is to: a) provide outreach, engagement and recovery oriented young adult centered planning and creation of social support systems, b) provide peer support services by young adult peers, particularly for young adults reluctant or disengaged in services, c) assist young adults in identifying and accessing resources to fit goals, d) demonstrate expertise in LGBT youth and connection to LGBT specific resources, e) participate in a statewide learning collaborative, and f) incorporate at least the philosophy and ideally the practice of the Transition to Independence Process (TIP) Model of support for Youth Adults in Transition. Partnering with Youth ERA Oregon, JCMH supports this drop-in center model, The Medford Drop, for youth ages 14-25; the focus of the program is education, employment and social connectedness, as well as character development and community service.

Early Assessment and Support Alliance (EASA): The purpose of the EASA program is to identify young adults, aged 15-25, who are experiencing (or are at high risk for experiencing) a newly emerging psychotic disorder. This program is geared towards providing intensive services as soon as possible to reduce the symptomology of this disease and decrease the negative impacts of the disease over the life course. The EASA program provides youth/young adults experiencing an onset of psychosis with the following services: trauma-informed mental health counseling utilizing the most current evidenced-based research and modalities; case management that provides youth assistance with financial, housing, relationships, school, and other areas which have been affected by their illness; supportive employment; peer supports; psychiatric and medication services; occupational therapy that helps youth and their family understand sensory issues and strategies for improving the outcome of treatment; family support, education and stress reduction activities; and crisis intervention with an enduring focus on helping young people to flourish to the greatest extent possible. These services will continue as appropriate for non-OHP members, and for five Jackson Care Connect clients as contracted.

ADULT TREATMENT SERVICES

<u>Adult Outpatient Treatment:</u> Jackson County Mental Health continues to provide outpatient services for indigent and uninsured throughout the county. Focusing on short term, solutions focused treatment, in addition to some long term services for those individual with Severe and Persistent Mental Health diagnoses.

Aid and Assist – Restorative Services: Aid and Assist screenings are managed through the Jail Diversion Team and are screened as they arise, through the Public Defender's Office or the court. After a Forensic Evaluation has been completed, a QMHP is assigned to interview the individual and should the team determine that the individual can receive the appropriate level of supports while the individual remains in the community, a recommendation to the court is made for community restoration. A county Aid and Assist docket has been created in Circuit Court in an effort to coordinate and resolve these cases as appropriate.

Assertive Community Treatment (ACT): ACT is an evidenced based intensive and community-based method of providing mental health care. Clients with serious and persistent mental illness or personality disorders are provided an alternative to traditional outpatient mental health care through an integrated community based team. Persons served by ACT may receive integrated substance abuse treatment, housing support, CBT, DBT, skills groups, peer supports, and Supported Education or Employment. Jackson Care Connect has contracted with JCMH for 40 ACT slots. JCMH will continue to offer these services to the indigent and under-insured, as dollars from OHA allow.

<u>Housing:</u> JCMH continues to work with other providers of Supported and Supportive Housing in the community. Originally working with Columbia Care to apply for Rental Assistance Program dollars through the state for SPMI, Veterans and Transition Aged Youth populations, JCMH continues to work with them for individuals that they are responsible for serving. Both Columbia Care and Options of Southern Oregon have developed housing for the OHP population in Jackson County and deliver those services to the various CCO members.

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JCMH continues to manage two transitional living homes that house 10 individuals, offer the supportive services and assistance need to find permanent housing. JCMH also funds transitional beds at the Kelly House through the Addiction Recovery Center (ARC) for individuals with co-occurring disorders involved with the criminal justice system and working on their addiction issues.

Adult Foster Homes. JCMH staff provide supportive services to individuals residing in adult foster homes, and coordinate with the other community providers to ensure that the individual's needs are met by the providers and that placements are timely and appropriate.

<u>Jail Diversion</u>: A partnership with the Jackson County Community Justice program, this program focuses on assisting adults with mental health issues to avoid becoming more entrenched with the criminal justice system through offering support and treatment. Program staff complete behavioral health screenings and provide collaborative release planning within the Jackson County Jail and the Community Justice Transition Center. They provide ongoing treatment services as appropriate and connect these individuals to appropriate services providers as needed.

Mental Health Court: Jackson County Mental Health Court is a partnership between JCMH and many other key community partners. Modeled after other evidence based treatment courts, the Mental Health Court supports are available to defendants charged with a crime in Jackson County Circuit Court who have a serious and persistent mental illness that appears to be the primary factor in the person's involvement with the criminal justice system. Mental Health Court provides a highly structured, supervised opportunity for eligible defendants to pursue mental health treatment, stability and independent well-being under intensive supervision of a multi-disciplinary team. JCMH provides the coordinator for this project and Jackson Care Connect and AllCare provide shared funding for this position.

<u>Multi-Disciplinary Staffings</u>: The purpose of inter-agency client staffing is to develop solutions for individuals who are struggling and slipping through the cracks of community services, as evidenced by multiple police or mental health emergency contacts, with the ultimate goal of preventing escalation of mental health symptoms and attendant crises. JCMH sponsored the formation of this group in 2012 through a subcommittee of the Public Safety Coordinating Council. This process has assisted several of the community's most high risk individuals in gaining stability and reducing police contact. JCMH will continue to chair this community group and serve in its capacity as convener.

<u>Peer Support Services</u>: Peer support is a research-based service delivered by state certified Peer Support Specialists. Peer support specialists self-identify as being in recovery from their own mental health and/or substance abuse problems; their personal experiences enable a depth of empathy and perspective that cannot be duplicated. Peers work as extra-help employees and support the clients they serve with skill development, advocacy, encouragement and assistance.

<u>Psychiatric Support Services:</u> Providing medication services and supports to individuals that will continue to be available for those individuals being served in our system. With the PharmBlue pharmacy

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embedded in the HHS building these medications are often filled at the on-site pharmacy with the goal of increased medication compliance and better outcomes for those individuals.

<u>Psychiatric Security Review Board (PSRB)</u>: Services for individuals under the mandate of the PSRB promote community integration for severely mentally ill persons after prolonged stays in state hospitals with the goal of moving to fully independent living situations when possible. Assessing for risk to public safety is an integral component of this work. Services include: the Hazel Center Secure Residential Treatment Facility (SRTF) run by Options which houses and treats 16 clients (8 clients under the PSRB) following discharge from the State hospital; and PSRB monitoring and supervision for up to 20 clients, living independently in transitional housing or in group homes under conditional release from the State hospital.

SERVICES FOR AGING AND PEOPLE WITH DISABILITIES (Enhanced Care):

Older Adult Behavioral Health Specialist: 1 FTE is currently funded through the OABHS initiative from OHA. Those dollars are passed through to the Rogue Valley Council of Government (RVCOG) to ensure collaboration and integration with the other services available in the county for older adults and individuals with mental health issues.

EXPANSION OF JAIL MH AND SUD TREATMENT **PROPOSAL** Mobile Crisis Outpatient Services 2019 Response with • 2 JCMH QMPH's CIT trained Law and 2 QMHA's at Enforcement Community Justice • Living Room Mental Health • Beckett Center Court • ED Recovery Compass House **Opportunities** Outpatient Court Peer Services Aid and Assist Services - partial Alternative sanctions Pre-trial and Diversion Court **Services** Services STOP Discharge Planning and Jail Services After Care Services 2 Wellpath QMHP's Outpatient services in the jail for crisis continued support and · 2 JCMH QMHP's screenings · 2 JCMH QMHA's 2 JCMH QMHP's for • Peers - partial assessment and treatment • SUD/MAT - partial · 2 JCMH QMHA's for • Resource Center at discharge planning Community Justice and care coordination • Peers - portions • SUD/MAT portions Existing Services correspond with the color of the pie chart