



Oregon CIT Newsletter

Summer 2020

Training Required to Maintain Oregon Criminal Justice Certification

Kevin Rau, DPSST, Behavioral Health Program Coordinator

People often ask how much maintenance training they are required to complete to maintain their DPSST certification. In Oregon, sworn police, corrections and parole & probation officers must meet certain standards to maintain their DPSST certification. These standards are set by the Board on Public Safety Standards and Training. For the purpose of the [maintenance training requirement](#), all of these disciplines fall under the category of “law enforcement officer”. DPSST certified law enforcement officers are required to complete 84 hours of maintenance or in-service training every three years. Of that 84 hours, three must be on the topic of or related to mental illness. The Board does not specify particular training content or material, leaving it to each agency to define the content.



More information about certification maintenance training requirements can be found on the DPSST web site at <https://www.oregon.gov/dpsst/CJ/Pages/Maintenance.aspx>

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Oregon State Trooper—Job Well Done!

Kevin Rau, DPSST, Behavioral Health Program Coordinator

Highlighting the amazing work done by first responders is more important than ever. Recently, Oregon State Police Trooper Zach Yoder, of The Dalles Command happened to see a person in distress and stopped to help. Al Barton, MS, LPC, the Deputy Director of the Mid-Columbia Center for Living (MCCFL), in The Dalles, sent a note to Trooper Yoder's supervisor, Lt. Les Kipper that read:



"I want to pass along how amazingly professional and thorough trooper Yoder was today in his response that ultimately saved a young person's life. The joint response w MCCFL crisis and OSP moved from a call of concern for a person w mental illness walking on an overpass to the person literally hanging off a 150 sheer cliff. I watched from about 50 feet as Yoder helped them back over the rail to safety and a PO Hold to hospital ensued. I looked over The cliff - it was sheer and directly above rocks and the Columbia. Scary!

At the hospital - the person's family was obviously upset and Yoder did an excellent job of explaining the balance between peoples civil liberties and freedoms and the ability of law-enforcement and crisis services to detain people. His calm demeanor and collaboration was stellar today. Please thank him on our behalf.



[I'm] not sure what type of official recognition OSP provides to troopers, but I'd be happy to share this experience. Too bad these positive outcomes and collaborations are not what we read in the media these days."

Stephen Bradley, the Jail Diversion and Mobile Crisis Team Supervisor with MCCFL and Wasco County CIT Coordinator added that Trooper Yoder initially saw the person in distress behaving as if they were not doing well. He stopped to speak with the person, and contacted the Mobile crisis team. Al Barton and Tamara Salinas with MCCFL mobile crisis responded. Initially the person was not a candidate for a Peace Officer Custody or Director's Custody, but Barton,

Salinas and Trooper Yoder remained in the area in the event the person needed further assistance. "Keen observation and fast response on the part of Trooper Yorder.", said Bradley.

Job well done Trooper Yoder!

CIT Program Coordinator Information

Note: Program information is subject to change

Clackamas County CIT Coordinator: Julie Bitz Email: jbitz@co.clackamas.or.us	Marion County CIT Coordinator: Deputy Nate Newsome Email: nnewsom@co.marion.or.us	Grants Pass Dept. of Public Safety Coordinator: Sgt. Mike Minor Email: mminer@grantspassoregon.gov
Columbia County CIT Coordinator: Not currently designated Email:	Portland Police Bureau Coordinator: Officer Jim Stegemeyer Email: jamesa.stegemeyer@portlandoregon.gov	Wallowa County CIT Coordinator: Brandon Miller Email: brandon.miller@wvcenterforwellness.org
Coos County CIT Coordinator: Lt. Cord Wood Email: cwood1@osp.oregon.gov	BOEC CIT (Tele-communications) Coordinator: Melanie Payne Email: melanie.payne@portlandoregon.gov	Oregon DOC CIT Coordinator: Chris Mortenson Email: christopher.w.mortensen@doc.state.or.us
Deschutes County CIT Coordinator: Melissa Thompson Email: melissa.thompson@deschutes.org	Jackson County CIT Coordinator: Rick Rawlins Email: rawlinrc@jacksoncounty.org	Port of Portland Police CIT CIT Coordinator: Officer TJ Erikson Email: tj.eriksen@portofportland.com
Douglas County CIT Coordinator: Officer Doug Walton Email: dwalton@cityofroseburg.org	Morrow County CIT Coordinator: Chris Humphreys Email: christopher.humphreys@gobhi.net	Baker County CIT Coordinator: Kelli Wright Email: kwright@ndninc.org
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Lane County CIT Coordinator: Sgt. Steve Sieczkowski Email: steven.sieczkowski@co.lane.or.us	Mid Columbia CIT Coordinator: Stephen Bradley Email: stephen.bradley@mccfl.org	Yamhill Co. Corrections CIT Developing
Grant/Wheeler CIT Coordinator: Chris Humphreys Email: christopher.humphreys@gobhi.net	Klamath County CIT Coordinator: Steven Ware Email: sware@kbbh.org	
Yamhill County CIT Coordinators/Emails: Cpt. Brandon Bowdle Email: bowdleb@co.yamhill.or.us Cpt. Tim Symons Email: tim.symons@mcminnvilleoregon.gov Bethany Ball Email: ballb@co.yamhill.or.us	Malheur County CIT Coordinator: Deputy Haylee Harding Email: haylee.harding@malheurco.org	
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Upcoming CIT Training Events

Deschutes County Stabilization Center Opens

Kevin Rau, DPSST, Behavioral Health Program Coordinator

Our jails have become de facto behavioral health facilities with some estimating that as many as 70% of those incarcerated at any given time have some level of behavioral health issue, and as many as half of those suffering from serious and persistent mental illness. It would be difficult to find anyone with intimate knowledge of local and municipal jails who would draw any other conclusion than the fact that this has become a monumental problem.



Deschutes County Stabilization Center Respite Stations

Five years ago, Deschutes County Sheriff

Shane Nelson contacted Holly Harris, the Behavioral Health Services Program Manager at [Deschutes County Behavioral Health](#), to say enough is enough. A coalition was developed to come up with an effective solution that addresses both community safety and the needs of those living with behavioral health issues. It was not long before the conversation turned to one about a facility where those in crisis can find respite and access to behavioral health services. The coalition also recognized the need to make it relatively easy for law enforcement to refer those in need to those services. Future plans include expanding the hours of operation

for the facility to 24/7 and the addition of a sobering station that will provide an additional layer of services and an additional jail diversion option for law enforcement.



The idea of creating a facility that is essentially a one-stop-shop addressing immediate crisis needs as well as short term case management when needed is a daunting task. That did not stop law enforcement,

behavioral health and other stakeholders in Deschutes County from pressing forward with the creation of the [Deschutes County Stabilization Center](#). The center opened in June and offers a robust array of services. Among them are a 24-hour crisis line, walk-in crisis services, peer support, a psychiatric nurse practitioner and a short-term respite unit. These are all in addition to short term case management and community crisis response services.

Deschutes County Stabilization Center Opens (Cont.)

Kevin Rau, DPSST, Behavioral Health Program Coordinator



Melissa Thompson, the Crisis Team Supervisor at Deschutes County Behavioral Health, said “it [the center] provides true emergency department and jail diversion for our community. We have individuals that often utilize the emergency department on a daily basis [and now we] have another option that is significantly less expensive and overall can provide wrap around support that is truly needed to stabilize the individual’s crisis.”.

This was truly a community effort with the most significant partner being the Sheriff’s Office, according to Thompson. In addition to patrol deputies and offices having the ability to bring community members in need of crisis services directly to the center during business hours, one of the most significant aspects of this collaboration is that behavioral health staff are able to work cooperatively with Deschutes County Jail officials to provide discharge planning services in an effort to reduce gaps in services when clients are being released from jail.

Other critical community partners in this endeavor are the Bend and Redmond Police Departments and the Deschutes County Chapter of the National Alliance on Mental Illness.

Current funding allows the center to be open from 7:00 AM to 9:00 PM five days a week. Additional funding is being sought to move the facility to a 24/7 operation. The facility is located at 63311 Jamison St, Bend, Oregon near the Deschutes County Jail. The non-emergency phone number for the center is 541-585-7210 and the 24-hour crisis line is 541-322-7500 ext. 9.

We Honor our Veterans!



Eugene PD Adjusts to Challenges Presented by COVID-19

Officer Bo Rankin, Eugene Police Department CIT Coordinator

As COVID -19 started to affect schedules and gatherings, the Eugene Police Department canceled all training. A 40-hour Lane Regional CIT course was completed just as the Governor's stay-at-home order took effect. Included in the CIT event, for the first time, was the 8 hour Mental Health First Aid. It received high marks. This felt like a success, but the future is certainly unclear. The agency held a three-hour CIT De-Escalation class for small groups in late June, to satisfy the 3 hour mental health training requirement to maintain certifications.



While EPD's call volume initially decreased at the onset of the pandemic, it has slowly increased to a near normal levels. Crisis calls, specifically, appear to have increased. The EPD Crisis Negotiation Team (CNT) has responded to 60 total calls as of June 30, 2019. Our previous known record for an entire year was 40 calls. CNT calls have evolved, becoming longer and more dynamic. Among those calls has been a significant increase in suicidal subjects and jumper calls.

The EPD Homeless Outreach team has struggled to function amidst quarantine restrictions and service provider shutdowns. Patrol officers continued to see an increase in crisis calls. Our homeless population has grown and shifted locations with little ability to access services. A mental health care system that seemed fragmented, disorganized and dysfunctional feels like it has collapsed. We have little if any access to homeless or mental health resources and our courts have nearly no ability to access state hospital beds. Our Community Court program, that has effectively helped people in the past, is scheduled to reopen in July.

We continue to use every tool at our disposal and hope systems will rebound and improve. The hope is to eventually establish an EPD Behavioral Health Unit that could coordinate care for our most frequent utilizers of services.

Much thought is being given to what 40-hour CIT looks like in Lane County moving forward. Will we return to the classroom or adapt to quarantine with a new approach?

Officer wellness has been a frequent consideration recently with increased workloads and stress associated with daily protest marches. Much of the community has been very supportive and appreciative of our services.

Join CIT International Today!



CIT INTERNATIONAL, INC.

Improving Responses to People in Crisis

MORE THAN JUST TRAINING:

Community Collaboration • A Vibrant and Accessible Crisis System • Police/First Responder Training • Behavioral Health Staff Training • Family/Consumer/Advocate Participation

JOIN THE MOVEMENT!

CIT International is a non-profit organization supporting local, national and international efforts to improve responses to people affected by mental illness.

For more information about CIT or how to become a member, please visit

www.citinternational.org or (888)738-CITI (2484).

About CIT Programs

The Crisis Intervention Team (CIT) model is a solution-focused community response to helping people with mental illness. CIT programs bring stakeholders together from the law enforcement, behavioral health and advocacy sectors, along with people who have lived experience with mental illness, to develop solutions for safely re-directing people in crisis away from the judicial system and into the health care system whenever appropriate.

About the CIT International Annual Conference

The CIT International Annual Conference, which takes place in August of each year, draws approximately 1,000 people largely from the law enforcement, behavioral health, and advocacy sectors. There are over 100 workshops related to topics involving the intersection of law enforcement, mental health, and criminal justice fields.

CIT was founded in Memphis, TN in 1988 as a key component to the community's demand for safer first responder crisis services. CIT is founded on principles of dignity, understanding, kindness, hope and dedication.

Benefits of CIT Membership

- Access to resources from around the country
- Access to subject matter experts
- Reduced cost to attend the annual CIT conference
- Membership to a highly respected organization
- Access to resources to strengthen your local community program

Impact of COVID-19 Epidemic on Crisis Response Efforts Varied

Kevin Rau, DPSST, Behavioral Health Program Coordinator

COVID-19 has impacted every aspect of our lives. The epidemics effects on crisis response capability have varied a great deal. In Klamath County, plans that were in motion to have clinicians in cars with officers was put on hold at the onset of the pandemic. According to Steven Ware, MS, the Mobile Crisis Team Supervisor at Klamath Basic Behavioral Health (KBBH), be-



havioral health crisis professionals remain available to respond into the field to assist officers just as before. He added that his office is “hoping to employ technology” to help with concerns of face-to-face contact that COVID-19 presents. Abby McClung, Communications Director at KBBH said, “Our staff have shown incredible resilience” in the face of the COVID-19 challenges.

“They have risen to the occasion”, said McClung.

Officer Trevor Anderson, with the Corvallis Police Department Community Livability Unit said, at the onset of the COVID-19 epidemic, in person follow-up contacts were suspended for a period of time. While some aspects of the crisis response efforts are slowly returning to pre-COVID levels, others are sure to be altered indefinitely. Officer Anderson said that the county’s behavioral health crisis workers are now working from home and are asked to make every effort to provide crisis follow-up by phone if possible. Another significant change, said Anderson, is that officers are now encouraged to ask those contacted in the community to come outside rather than the officer going inside a home or other building, when possible. He added that there may have been an initial dip in behavioral health related crisis calls but they seem to have returned to near the same level they were prior to the onset of the COVID-19 epidemic.



The need for crisis services has certainly not diminished in the face of COVID-19. Crisis response professionals are finding it necessary to be creative in how they provide much needed crisis and post-crisis services. The key is remembering that none of us are operating in a vacuum and we should not hesitate to collaborate with our CIT colleagues throughout Oregon.

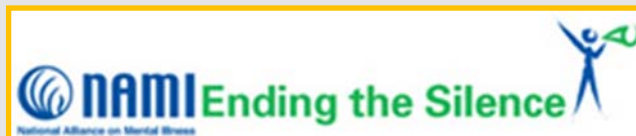
NAMI Offers Programs to Educate And Support Individuals and Families Living with Mental Illness

Kevin Rau, Behavioral Health Program Coordinator, DPSST

Local NAMI Affiliates support CIT programs across Oregon and around the country. However, NAMI also provides support through amazing and vital education and support programs (listed below) for individuals and families living with mental illness. You will find more detailed information about the individual programs at www.namior.org.



A 10-week, peer-led course emphasizing recovery from mental illness as a feasible goal.



A 50-minute interactive presentation for middle and high school students discussing the early warning signs of mental illness and what to do if they or someone they know exhibits these signs.



Individuals in recovery from mental illness share their personal stories of illness and recovery to reduce stigma associated with mental illness and raise understanding.



A 12-week course for families and friends of individuals with mental illness covering major mental illnesses and their treatments, medication basics, communication skills, and more.



A 6-week adaption of Family-to-Family customized for families of Veterans and active duty military personnel.



A 6-week peer-directed course for parents or caregivers of children with a serious mental illness or emotional disturbance.



Una programa de 12 sesiones gratuitas para familiares, parejas, amigos, y seres queridos de adultos que viven con un enfermedad mental.



A weekly, 90-minute, peer-led support group where people learn from one another's experiences, share coping strategies, and offer mutual encouragement.



A monthly meeting where family members can talk frankly about their challenges and help one another through lived experience.

SUICIDE LIFELINE Call 800-273-8255 (24/7/365) Text 273TALK to 839863 <i>(8 am-11 pm PST daily)</i>	SENIOR LONELINESS LINE Call 503-200-1633 We support seniors in our community who are feeling lonely and having difficulty connecting.	211INFO Call: 211 Download the 211info App Go to: 211info.org For information on resources in your community.
ALCOHOL & DRUG HELP-LINE Call 800-923-4357 (24/7/365) Text RecoveryNow to 839863 <i>(8am-11pm PST daily)</i> For individuals and family members seeking crisis intervention, treatment referral, and chemical-dependency information.	YOUTHLINE Call 877-968-8491 Text teen2teen to 839863 Chat at www.oregonyouthline.org A teen-to-teen crisis and help line. Contact us with anything that may be bothering you; no problem is too big or too small! Teens available to help daily from 4-10 pm Pacific Time (off-hour calls answered by Lines for Life).	MILITARY HELPLINE Call 888-457-4838 <i>(24/7/365)</i> Text MIL1 to 839863 <i>(8 am-11 pm PST daily)</i> Support for service members, veterans, and their families that is independent of any branch of the military or government.

Early Assessment and Support Alliance (EASA)

EASA is a network of programs and individuals across Oregon who are focused on providing rapid identification, support, assessment and treatment for teenagers and young adults who are experiencing the early signs of psychosis. EASA is designed as a transitional program, with the goal of providing the education and resources the person needs to be successful in the long-term. Most individuals participate in EASA for about two years, although that timeframe varies.

Find your local EASA program at <http://www.easacommunity.org/easa-programs.php>.

Oregon Family Support Network (OFSN)

The children, youth and families who OFSN works with have complex challenges resulting from mental or behavioral health disorders. These families and youth also struggle with many obstacles and barriers including poverty, domestic violence, homelessness, disconnection from family, untreated mental health and addictions, as well as profound traumatic experiences. The OFSN network is best described as peer-delivered service. Families and youth come to OFSN for education and training, community supports, advocacy and/or for family partner services through behavioral health systems. Actual services within a county or region can be different. This is because OFSN contracts individually with counties and behavioral health systems, as well as receiving grant monies.

To find information about regional OFSN offices, go to: <http://www.ofsn.org/ofsn-regional-offices-oregon/>.

CITCOE seeks contributors for the Oregon CIT Newsletter

The CITCOE Newsletter staff want to make the Oregon CIT Newsletter a valuable tool for everyone who has an interest in advancing the impact of CIT in Oregon. To do that, we need your help! We are seeking information for articles on new and innovative programs, CIT success stories, effective partnerships and existing and/or emerging CIT programs, as well as coming CIT related events.

If you have an idea for an article for the Oregon CIT Newsletter, please let us know.

Contact: kevin.rau@state.or.us

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Integrity - Compassion - Accountability

