

Extend contract with Central City Concern to provide services to chemically-dependent, homeless adult chronic arrestees

If you wish to speak to Council, please print your name, address and email

Name (PRINT)

Address and Zip Code (Optional)

Email (Optional)

✓ <i>[Signature]</i>		
✓ Maggie		
spoke ✓ Fletcher Nash		srnashfletcher@gmail.com
✓ Jeanne L Connet		
✓ Charles Bridgecraft		
✓ MARY SIPE		

Moore-Love, Karla

From: King, Robert
Sent: Tuesday, May 14, 2019 4:39 PM
To: Moore-Love, Karla
Cc: Council Clerk – Testimony; Rochon, Emily; Washington, Mustafa
Subject: FW: SCT contract
Attachments: 4. BHU_DOJ Action Item Updates_2019Q4_SCT.pdf; SCT Trend Analysis.pdf; SCT_DOJ Report_2019.pdf; PoliceResponsetoHomelessness.pdf

Karla can you distribute this information to the Council Offices. Thanks you. Robert

From: Rochon, Emily
Sent: Thursday, May 9, 2019 5:30 PM
To: King, Robert <Robert.King@portlandoregon.gov>; Hettman, Casey <Casey.Hettman@portlandoregon.gov>
Cc: Grant, Nicole <Nicole.Grant@portlandoregon.gov>
Subject: Re: SCT contract

Dear Mayor and the Commissioners I look forward to testifying tomorrow at City Council on Item # 432. I have provided data points, from the most recent Capstone study:

2018 Portland State University Capstone study was the 10th evaluation of the SCT.

- 31% of individuals who engage in the program for over 30 days, complete the program
- Individual who complete the program have a 86% reduction in criminal behavior the year after exiting the program
- 75% of ALL program participants have a reduction in crime post programming
- Cost-benefit analysis show for every \$1 spent on the program is a \$13 saving in jail beds and court costs alone

I have also attached the following for further information:

DOJ Action Item Updates - SCT updates since 2014

DOJ 2019 Report - most recent analysis and status of DOJ Action item #112

SCT Trend Analysis - completed quarterly and shared with DOJ and partner agencies

Police Executive Research Forum - SCT highlighted (pg. 36-37) in regards to best practices in police response to homelessness

Please let me know if your need anything else.

Thank you,

Emily Rochon, Program Manager

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Portland Police Bureau
Behavioral Health Unit
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Task Description

112

SCT shall continue to service dual-diagnosis individuals with criminal records

Task Requirements: The Service Coordination Team ("SCT"), or its successor, shall serve to facilitate the provision of services to individuals who interact with PPB that also have a criminal record, addictions, and highly acute mental or physical health service needs.

Status Complete - pending external review

Action Steps:

1. Ensure continued public funding for the service coordination team
2. Demonstrate that SCT serves a population of offenders with behavioral health issues who are not adequately served by the community health care system
3. On an ongoing basis, demonstrate that SCT evolves to ensure that population served reflects criminalized individuals with behavioral health issues

Task Date Completed: 5/31/2013 ☐ **Received DOJ Approval?** **Approval**

Evidence of Completion:

1. IGA Central City Concern FY13-14
2. IGA Multnomah County/Volunteers Of America FY13-14
3. City Budget FY13-14
4. SCT Org Chart
5. SCT Eligibility Criteria
6. SCT Program Flow Chart
7. SCT Program Manual 2013-2014
8. SCT SOP

Status Note:

2014 Q1 Update: SCT continued to operate as designed during the quarter.

2014 Q2 Update: SCT continued to serve the designated population. It held a graduation ceremony on June 26, 2014 for 19 successful participants.

2014 Q3 Update: SCT continued to serve its designated population.

2014 Q4 Update: The mission of SCT remained the same this quarter. There were 89 different individuals served by the SCT program. Fifty-six people "exited" the program. Forty nine percent of the referrals made to the SCT program were from the District Attorney's Office.

2015 Q1 Update: The SCT program has expanded its connections with ED diversion programs within OHSU, Legacy, Multnomah County and Family Care Health Plans. These programs seek alternative resources for high utilizers of emergency medical services. The overlap in client profiles creates a natural referral stream into SCT services when appropriate and available. In addition, significant progress has been made toward the expansion of the Service Coordination Team. A proposal has been formalized that would increase the capacity of the program in both addictions treatment and engagement of mentally ill and dually diagnosed individuals.

The program expansion would add six behavioral health stabilization beds to the current program structure. These beds would allow the BHU to more ably address the needs of those with higher acuity mental illness and co-occurring disorders by creating a direct housing resource for the BHRTs. Access to stabilization beds would be an invaluable tool for intervention and engagement as evidenced by SCT's previous experience. Providing persons in crisis a stable place to land can significantly change the outcomes of these interactions.

In addition, such individuals often require a higher level of care than the current program model is designed to provide. In these cases, access to behavioral stabilization beds would allow an uninterrupted opportunity to connect to appropriate mental health systems. Further enhancements would be made to the current SCT model through:

- Additional outreach
- Increased addictions services for women
- Culturally specific services

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- Extended treatment (Suboxone & pain management)
- Expanded use of peer mentors

The proposed expansion will not require additional funding but rather reallocation of current funding.

2015 Q2 Update: Starting FY 2015-16, the Service Coordination Team will increase the capacity of the program in both addictions treatment and engagement of mentally ill and dually diagnosed individuals. The expansion did not require additional funding, but reallocated the entire SCT budget to Central City Concern. This shift ended funding to VOA when the current IGA expired. BHUAC voted in support of the proposed expansion. City Council approved the proposal/ordinance on June 25, 2015.

SCT will add six behavioral health stabilization beds to the current program structure. These beds will allow the BHRTs to assertively address the needs of those with higher acuity mental illness and co-occurring disorders by creating a direct housing resource for the BHRTs. Such access should be an invaluable tool for intervention and engagement as individuals referred to the BHRTs often experience periods of unstable housing during times of crisis. This will provide a stable place to land which will hopefully significantly change the outcomes of these interactions.

In addition, SCT participants living with dual diagnosis or exhibiting higher acuity symptoms of mental illness often require a higher level of care than the current program model is designed to provide. In these cases, access to behavioral stabilization beds will allow uninterrupted access to services and an opportunity to connect to appropriate mental health systems.

Enhancements will also be made to the current SCT model through:

- Enhanced outreach
- Increased addictions services for women
- Culturally specific services
- Extended treatment (Suboxone & pain management)
- Domestic Violence treatment
- Expanded use of peer mentors

SCT Program Manager will be involved in the development and implementation of the six behavioral stability beds as well as managing new partnerships with the addiction treatment provider, Central City Concern.

2015 Q3 Update: The Service Coordination Team (SCT) continues to serve its designated population, providing access to supportive housing, medical care, employment and addiction and mental health treatment services. Engagement activities include outreach on the street and in jail, hospitals, detox centers, and other community agencies to offer SCT services and provide a smooth transition to SCT housing without returning to homelessness. Service Coordination Team Officer and Central City Concern Outreach Case Manager also work as a team to identify and offer services as part of street outreach. They also focus on educating community providers (shelters, treatment programs...) about the SCT program and referral process.

SCT has supported the increase in the hiring and utilization of Peer Mentors to support SCT participants in the engagement stage, providing basic needs, transportation to appointments, pro-social activities, connection to the recovery community, and life skills.

Partnership with Central City Concern Recovery Center (CCCRC) has enriched SCT services by providing gender and culturally specific addiction treatment, domestic violence treatment, and access to Suboxone and pain management services. CCCRC and the Housing Rapid Response staff are represented at the weekly SCT referral meeting to coordinate best care for the SCT participants.

Central City Concern/Housing Rapid Response continues to develop the six-bed behavioral health stabilization program. Central City Concern is currently in the process of hiring staff, developing program guidelines, and renovating the rooms and staff office. Program eligibility criteria was presented and approved by BHU Advisory Council on 8/26/15. These beds will allow the BHRTs to assertively address the needs of those with higher acuity mental illness and co-occurring disorders by creating a direct housing resource for the Behavioral Health Response Teams.

2015 Q4 Update: The Service Coordination Team (SCT) continues to serve its designated population, providing access to supportive housing,

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intensive case management, medical care, and addiction and mental health treatment services. The SCT model is designed to address the high-needs of the participants throughout the stages of the program. Engagement activities include outreach on the street, jail, hospitals, detox centers, and other community agencies to offer SCT services and provide a smooth transition to SCT housing without returning to homelessness. The SCT Officer and Central City Concern (CCC) Outreach Case Manager work as a team to identify and offer services as part of street outreach. They also focus on educating community providers (shelters, treatment programs, etc) about the SCT program and referral process.

Utilization of Peer Mentors throughout the program help to provide basic needs, system navigation, transportation to appointments, participation in pro-social activities, connection to the recovery community, and life-skill building. Participants give back to the community by participating in formal volunteer activities and are assigned an Employment Specialist. Participants work with a Housing Specialist to address barriers in transitioning to permanent housing. Supportive services continue for a year after transitioning to permanent housing.

Partnership with Central City Concern Recovery Center (CCCRC) has enriched SCT services by providing access to gender and culturally specific addiction treatment, domestic violence treatment, and Suboxone and pain management services. CCCRC and the Housing Rapid Response staff are represented at the weekly SCT referral meeting to coordinate best care for the current and potential SCT participants.

Central City Concern/Housing Rapid Response has implemented the Supportive Transitions and Stabilization (STS) program. The six beds allow the Behavioral Health Response Teams to assertively address the needs of those with mental illness and co-occurring disorders who temporarily require a more extensive level of care by creating a direct housing resource. STS provides low barrier housing, intensive case management, and peer support services. STS addresses basic needs, transportation, access to health care, provides referrals to appropriate mental health and addiction treatment, connection to outside recovery communities, housing and income barriers. Formal STS referrals were considered on 11/30/15, with first bed utilization on 12/16/15. STS Program Supervisor is a representative at the Service Coordination Team referral meeting weekly for coordination of care for potential and current participants.

2016 Q1 Update: The Service Coordination Team (SCT) continues to serve its designated population, providing access to supportive housing, intensive case management, medical care, and addiction and mental health treatment services. The SCT model is designed to address the high needs of the participants throughout the stages of the program. Engagement activities include outreach on the street, jail, hospitals, detox centers, and other community agencies to offer SCT services and provide a smooth transition to SCT housing without returning to homelessness. SCT Officer and Central City Concern Outreach Case Manager work as a team to identify individuals and offer services as part of street outreach. They also focus on educating community providers (shelters, treatment programs...) about the SCT program and referral process.

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housing and income barriers. Formal STS referrals were considered on 11/30/15, with first bed utilization on 12/16/15. STS Case Manager assists clients with daily needs, navigation of the Mental Health and Health Services systems, and screens potential clients Mon-Fri from 8:00am – 4:00, and Intake from 8:00-2:00pm. This will streamline the intake process, and will help triage and address mental health, addiction and homelessness in a timely manner. Peer Support Specialists introduce participants to the recovery community, Dual Diagnosis support groups, and other mental health support agencies and groups. STS participants are included in the community meals and activities provided in the building which promotes pro-social interactions with others. STS Program Supervisor is a representative at the Service Coordination Team referral meeting weekly for coordination of care for potential and current participants. STS Program Supervisor and SCT Program Manager meet regularly to discuss any policy and/or procedure changes.

The grant agreement was amended in order to expand existing resources, ultimately creating at least 8 low-barrier beds that are connected to supportive services and SCT may have access to in the future. The Mayor was in full support of the amendment, which will be contributing in a small way to the solution of the Housing Emergency in Portland.

2016 Q2 Update: Service Coordination Team (SCT) honored 31 graduates from the program at City Hall on 5/26/16. Speakers included a SCT Alumni, Mayor Charlie Hales, and Portland Police Assistant Chief Robert Day. Each present graduate spoke about their participation in the program and their journey in the recovery process. It was a very moving ceremony for all.

SCT Program Manager conducted outreach to several service agencies in order to provide participants access to additional services. This included: Oregon Judicial Department's Responsible Paying Parent program, Metropolitan Public Defender's Clean Slate program, Multnomah County Mental Health and Addictions, DePaul Treatment Center, Outside In, Central City Concern Eastside Concern, and Transition Projects Inc.

The grant agreement was amended in order to extend the current grant until October 31, 2016. Service Coordination Team is in the process of converting the grant to a service contract through a Request for Proposal. The extension will avoid a gap in services until the RFP process is complete and the new service contract executed.

2016 Q3 Update: The Service Coordination Team (SCT) continues to serve its designated population, providing access to supportive housing, intensive case management, medical care, addiction and mental health treatment services. The SCT model is designed to address the high-needs of the participants throughout the stages of the program. Engagement activities include outreach on the street, jail, hospitals, detox centers, and other community agencies to offer SCT services and provide a smooth transition to SCT housing without returning to homelessness. SCT Officer and Central City Concern Outreach Case Manager work as a team to identify and offer services as part of street outreach. They also focus on educating community providers (shelters, treatment programs...) about the SCT program and referral process.

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Partnership with Central City Concern Recovery Center (CCCCRC) has enriched SCT services by providing access to gender and culturally specific addiction treatment, domestic violence treatment, and Suboxone and pain management services. CCCCRC and the Housing Rapid Response (housing) staff are represented at the weekly SCT referral meeting to coordinate best care for the potential and current SCT participants.

Central City Concern/Housing Rapid Response has implemented the Supportive Transitions and Stabilization (STS) program. The six beds allow the Behavioral Health Response Teams to assertively address the needs of those with higher acuity mental illness, co-occurring disorders, and unstable housing by creating a direct housing resource. STS addresses basic needs, transportation, access to health care, provides referrals to appropriate mental health and addiction treatment, connection to outside recovery communities, housing and income barriers. STS Case Manager and SCT Program Manager worked together to streamline the screening and

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intake process, which will help triage and address mental health, addiction and homelessness in a timely manner. Peer Support Specialists introduce participants to the recovery community, Dual Diagnosis support groups, and other mental health support agencies and groups. STS participants are included in the community meals and activities provided in the building which promotes pro-social interactions with others. STS Program Supervisor is a representative at the Service Coordination Team referral meeting weekly for coordination of care for potential and current participants. STS Program Supervisor and SCT Program Manager meet regularly to discuss any policy and/or procedure changes.

One note regarding the STS beds; in QTR 3 of 2016, one bed in a double occupancy room was taken off-line due to systemic barriers. This count utilized for this quarter's analysis included five beds for 77 days and 6 beds for 15 days. In the future, this count will only use a 6 bed count.

The program opened the Recovery Empowerment Center, which is a space separate from the housing units for SCT participants to utilize for pro-social activities, education/life-skill groups, community events, and Alumni functions. The grand opening was on 7/14/16 and SCT Manager was invited to speak to highlight the history and evolution of the program.

SCT Program Manager conducted outreach/networking to several service agencies in order to provide participants access to additional services. This included: Multnomah County Mental Health Jail transition counselor, Multnomah County Public Defender's Office/Clean Slate Program, Oregon Health & Science University New Directions Program, Multnomah County Mental Health & Addictions Culturally Specific Clinical Services, Multnomah County Mental Health & Addictions Exceptional Needs Care Coordinator.

SCT Program Manager and SCT Officer accompanied a staff from the City Budget Office to a community event for the SCT participants. Program Manager also met with City Commissioner Fritz to provide overview and updates on the SCT. SCT Program Manager, SCT Officer, and two SCT graduates presented, "Breaking the Cycle of Addiction and Criminality," at the Reginal CIT Conference in Tacoma, WA. The SCT graduates are also employed by our contracted agency.

The RFP process was completed this quarter, converting the current SCT grant agreement into a service contract. The next steps include presenting the award decision to City Council and developing the final contract, which are both done through Procurement. The new contract will start 11/1/16.

2016 Q4 Update: The Service Coordination Team (SCT) continues to serve its designated population, providing access to supportive housing, intensive case management, medical care, addiction and mental health treatment services. See detailed program description in previous quarterly reports.

Central City Concern/Housing Rapid Response continues to operate the Supportive Transitions and Stabilization (STS) program. See detailed program description in previous quarterly reports.

SCT Program Manager conducted outreach/networking to several agencies in order to offer program information and provide participants access to additional services. This included: Central City Concern Sobering, CHIERS, Hooper Detox, and the Recuperative Care Program, Law Enforcement Assisted Diversion, and participated in the Safety and Justice Challenge Networking meeting in Seattle, WA.

SCT Coordination Team Meeting's long time representative from Portland Patrol Inc.(PPI)/Clean and Safe retired this quarter but was replaced by the President of PPI. Two officers from PPB bike patrol are also representing at the Coordination Team Meeting, since they provide numerous referrals to the program.

City Council authorized the three-year service contract, but the final contract is still being developed by Procurement. The new contract began 11/1/16. The service contract was awarded via a RFP process.

2017 Q1 Update: The Service Coordination Team (SCT) continues to serve its designated population, providing access to supportive housing, intensive case management, medical care, addiction and mental health treatment services. See detailed program description in

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previous quarterly reports.

Procurement continues to work with Central City Concern on the formal contract, although it is not signed by all parties. SCT Program Manager will provide final contract, with signatures, in the supporting documents in the quarter it is completed.

Central City Concern/Housing Rapid Response continues to operate the Supportive Transitions and Stabilization (STS) program. See detailed program description in previous quarterly reports.

SCT Program Manager conducted outreach/networking to several agencies in order to offer program information and provide participants access to additional services. This included: Central City Concern Old Town Recovery, DePaul Treatment Center, Bellevue WA (presentation and tour), Multnomah County Addictions/African-American culturally specific services, Treatment on Demand, Portland Business Alliance, Multnomah County Health Department, Oregon Health & Science University (OHSU) care management team, and Folktime. SCT Program Manager also attends several community events involving current participants and alumni. This included a client art event and a recovery basketball tournament.

SCT Program Manager works in collaboration with the Law Enforcement Assisted Diversion (LEAD) Program Manager and team. Although a different program, with different treatment modalities and services, there is an overlap of possible clientele. The LEAD program will refer clients to SCT when clients have identified a desire for housing and addiction treatment. LEAD does not have formal housing or treatment services attached to their program. The LEAD Program Manager has attended the SCT meeting to learn about SCT as a whole and the structure of our collaboration team. SCT Program Manager is a participant in the LEAD coordination meeting twice a month.

2017 Q2 Update: The Service Coordination Team (SCT) continues to serve its designated population, providing access to supportive housing, intensive case management, medical care, addiction and mental health treatment services. See detailed program description in previous quarterly reports. The final contract for FY16-19 has been completed.

SCT Program Manager collaborates with the Law Enforcement Assisted Diversion (LEAD) Program Manager and team. See detailed description in previous quarterly reports. LEAD does not have formal housing or treatment services attached to their program. SCT has served several LEAD individuals in the program to meet the individual's needs. Due to this partnership, SCT Program Manager is a participant in the LEAD coordination meeting twice a month.

SCT Program Manager conducted outreach/networking to several agencies to offer program information and provide participants access to additional services. These included: Multnomah County START court; Multnomah County/Central City Concern Stabilization Treatment Program; Multnomah County Parole Transitions program; Metropolitan Public Defenders; Blanchet Farms; Hillsboro Police Department; CODA/University of Ireland; DePaul Treatment program; and CIT/Collier County, Florida. SCT Program Manager and SCT Officer also attended several community events involving current participants and alumni.

This quarter SCT Program Manager and BHU Data Analyst presented pertinent data for the annual Portland State University Capstone project. The executive report has not yet been finalized by PSU but will be available next quarter.

SCT Officer is conducting weekly outreach services in collaboration with the Central Neighborhood Response Team (NRT), with program staff. This is to assess and offer services to individual that are generating multiple police calls in neighborhoods/businesses. Next step is to connect with East and North NRT.

2017 Q3 Update: This quarter, SCT Program Manager conducted outreach/networking to several agencies in order to offer program information and provide participants access to additional services. This included: SE Works, Sheriff Reese/County, Portland Business Alliance, Community Peace Collaborative Forum, Central City Concern Employment Access Center, and Clackamas Service Center.

The Central Precinct Commander, Central Captain, SCT Program Manager and SCT Officer, along with Central City Concern supervisors, conducted a tour of the SCT's operations for the staff of the Mayor's office. The team highlighted the sites of treatment programs, details of the programs and the various services provided.

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CIT Coordinator, BHU Lieutenant, SCT Program Manager, and SCT Officer also attended an SCT summer BBQ for current participants in the program.

The 2017 Capstone executive report has been finalized by PSU. SCT Program Manager and Central City Concern Director will be reviewing, evaluating, and making recommendations based on conclusion of the report.

SCT Program Manager was invited and has been participating in a weekly conference for Summer Public Health, Safety, and Service Coordination by the JOINT Office of Homeless Services. This is a collaboration of service providers, law enforcement, ONI, City of Portland, Multnomah County, Parks, and ODOT and purpose is to offer directed services to homeless individuals prior to "clean-ups," and/or areas which are generating multiple calls. It was decided this collaboration will continue on a weekly basis. SCT Officer continues to offer support to all Neighborhood Response Teams (NRT).

2017 Q4 Update: The Service Coordination Team (SCT) continues to serve its designated population, providing access to supportive housing, intensive case management, medical care, addiction and mental health treatment services. See detailed program description in previous quarterly reports

Central City Concern/Housing Rapid Response continues to operate the Supportive Transitions and Stabilization (STS) program. See detailed program description in previous quarterly reports.

SCT Program Manager works in collaboration with the Law Enforcement Assisted Diversion (LEAD) Program Manager and team. LEAD does not have formal housing or treatment services attached to their program. SCT has served several LEAD individuals in the program and LEAD and SCT work in collaboration to meet the individual's needs. SCT Program Manager is a participant in the LEAD coordination meeting twice a month.

SCT Program Manager conducted outreach/networking to several agencies in order to offer program information and provide participants access to additional services. This included: Community Peace Collaborative Public Forum, DePaul Treatment Quality Improvement, Public Health, Safety and Service coordination/JOINT Office, Law Enforcement Assisted Diversion meet and greet, Lake Oswego law enforcement, Lifeworks Treatment, Old Town Business Association, and Blanchet House.

SCT Program Manager and SCT Officer continue to work in collaboration with Law Enforcement Assisted Diversion (LEAD), Service Coordination weekly conference calls by the JOINT Office of Homeless Services, and Neighborhood Response Teams (see previous quarter reports).

SCT Program Manager has been a participant in the Downtown Public Safety Action Committee (DPSAC) for several years. DPSAC's goal is to address public safety issues in the downtown core by collaborating with various partners. Current mission statement is: "The Public Safety Action Committee is a place for city residents, businesses, property owners, and local governments to be informed, be heard, and be engaged in finding new ways to ensure livability and public safety." Partners include, but not limited to, Portland Police Bureau (Command staff, Central Neighborhood Response Team, Service Coordination Team), Park Rangers, Clean and Safe, Portland Patrol Inc., Portland Business Alliance, University of Oregon, Hilton, Office of Neighborhood Involvement, Multnomah County District Attorney, Julia West House, Mercy Corp, Friends of Riverplace, My Father's House, Can We Help, Securitas, City of Portland Bureau of Internal Business Services, and Bill Natio Company.

BHU and SCT have started to produce a quarterly trend document that analyzes trends and outcomes for clients. The SCT hopes to present this data to its Coordination Team Meeting and also the BHUAC.

2018 Q1 Update: The Service Coordination Team (SCT) continues to serve its designated population, providing access to supportive housing, intensive case management, medical care, addiction and mental health treatment services.

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It held a graduation ceremony at City Hall for the participants who completed the program. SCT honored 44 graduates and was joined by Chief Outlaw and Mayor Wheeler, who both congratulated participants for their dedication and hard work.

SCT Program Manager conducted outreach/networking to several agencies in order to offer program information and provide participants access to additional services. This included: Transition Projects Inc., Portland Patrol Inc., Maybelle Center, City Team, Multnomah County Justice Reinvestment District Attorney, Prescott Terrace, Volunteer's of America Men's Residential Program, and Oregon Harbor of Hope.

SCT Program Manager and SCT Officer continue to work in collaboration with Law Enforcement Assisted Diversion (LEAD), the JOINT Office of Homeless Services, and Neighborhood Response Teams (see previous quarter reports).

2018 Q2 Update: SCT Program Manager conducted outreach/networking to several agencies in order to offer program information and provide participants access to additional services. This included: Portland State University Capstone Study, Ventura Police Department, Tualatin High School Criminal Justice Career students, Gresham Police Department, Transitions Services Unit/Multnomah County, Oregon Health and Science University hospital social workers, Multnomah County Parole and Probation, Central City Concern Benefits & Entitlement Specialist Team.

Furthermore, the City of Portland's FY2018-19 Budget re-establishes ongoing funding of \$1.5 million for the Service Coordination Team to provide supportive housing, drug and alcohol treatment services, and employment readiness support for houseless persons. Ongoing resources were eliminated from this program late in the budget process last fiscal year. This action ensures continuation of the program servicing homeless persons with addictions and criminal history.

Portland State University conducted the 10th annual Capstone study on the Service Coordination Team this quarter. The final executive report has not yet been received.

Service Coordination Team was highlighted in this year's Police Executive Research Forum/PERF. The report was focused on, "The Police Response to Homelessness." This was completed after the PERF conference, attended by SCT Program Manager and Central Precinct Commander in Long Beach, CA.

2018 Q3 Update: The City of Portland's FY2018-19 adopted budget also included an increase in the contract amount to expand STS services as well as inflation adjustment. Amendment to the contract is scheduled to be evaluated in Q3 through City Council. SCT Program Manager and BHU Officer presented at the CIT International Conference in Kansas City, MO. Presentation was a detailed overview of the Service Coordination Team, "Breaking the Cycle of Addiction and Criminality." An SCT Graduate presented at the Mayor's Community Forum regarding addiction and the criminal justice system.

2018 Q4 Update: SCT Program Manager conducted outreach/networking to several agencies in order to offer program information and provide participants access to additional services. This included: CIT Regional Conference, which included a presentation by SCT Program Manager and BHU Officer, Cascadia Intensive Street Outreach, Oregon Health and Science University nursing students, Old Town/China Town Business Association, and Transition Projects Street Outreach Team. Further, the amendment to the budget for an increase in SCT services referenced last quarter was reviewed and approved by City Council.



2019 Q1

The mission of the Service Coordination Team (SCT) is to improve public safety, reinforce community livability and increase treatment outcomes for chronic offenders through the coordination of law enforcement, criminal justice, and supportive housing and treatment resources. The SCT Program offers housing and treatment to chronic offenders in order to address their addiction and the root causes of criminality. Most importantly, the SCT offers real, attainable solutions that help people change their lives.

The Service Coordination Team (SCT) expanded its operations by implementing the Supportive Transitions & Stabilization (STS) Program, run by Central City Concern's Housing Rapid Response. The program allows the BHU to assertively address the needs of those with mental illness and co-occurring disorders who temporarily require a more extensive level of care by creating a direct housing resource. Individuals referred to the SCT and BHRTs often experience periods of unstable housing and come into contact with the police during times of crisis. Providing safe, service-connected housing can significantly change the outcomes of these interactions. STS provides 24-hour staffing, including case management and peer supportive services. STS participants will have the opportunity to address basic needs, connect with health care and treatment, engage with community support systems, and have uninterrupted transition to appropriate services.

The below information will highlight trends for both the SCT program and the STS program.

Data extracted on 04/09/19 from RegJIN_Main. System records are continually updated and revised as additional information is received.

189500

Service Coordination Team Referrals

INDIVIDUALS REFERRED:

For 2019 Q1, there were 212 people that were referred to the SCT program for follow-up service. Furthermore, from 2015 Q2 through 2019 Q1, there have been a total of 3,169 individuals referred, with an average of 198.1 per quarter.

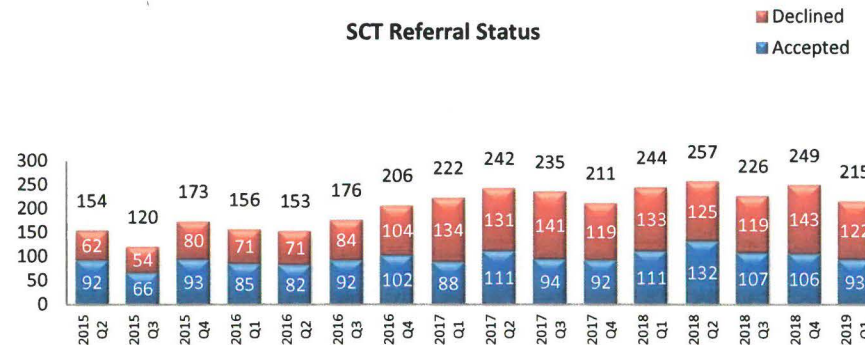
SCT Individuals Referred



REFERRAL STATUS:

From 2015 QTR 2, through 2019 QTR 1, there were 3,239 referrals to SCT, including individuals with multiple referrals. This is an average of 202.4 per QTR. Also, the SCT has accepted 48% of all referrals into the program.

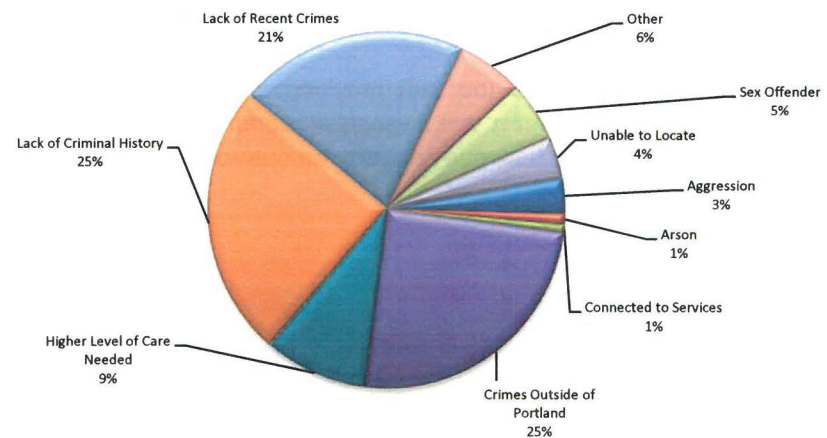
SCT Referral Status



REASON FOR DECLINE:

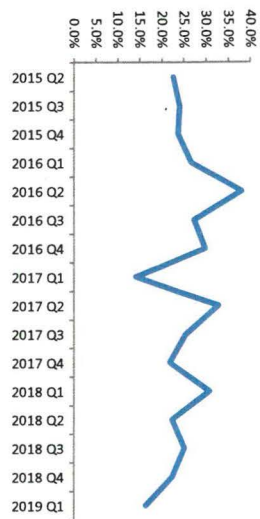
For 2019 Q1, the most prevalent reason for referrals being declined was Lacks Criminal History (36%). Overall, the most prevalent reason for referrals being declined is individuals committing crimes outside the City of Portland (25%) and Lack of

SCT Referral Reason for Decline

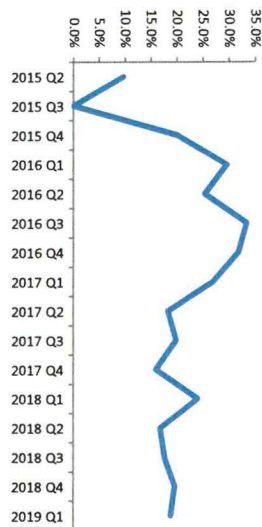


REASON FOR DECLINE-PERCENT OF DECLINES BY QUARTER:

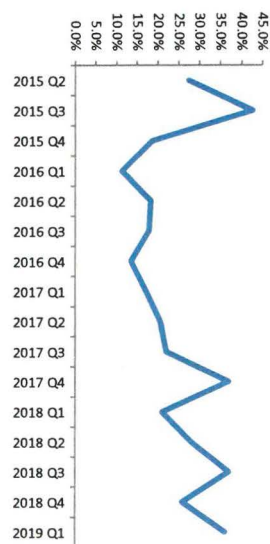
Crimes Outside of Portland



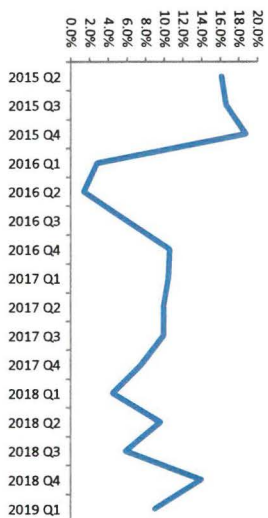
Lack of Recent Crimes



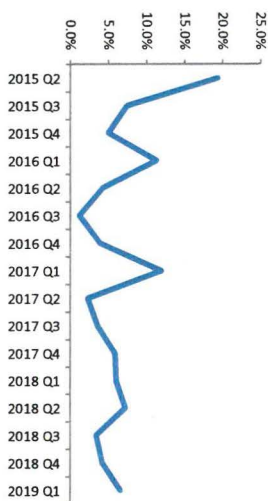
Lack of Criminal History



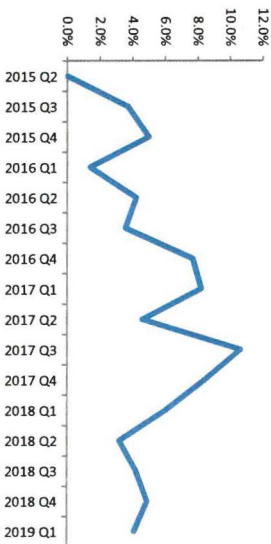
Higher Level of Care Needed



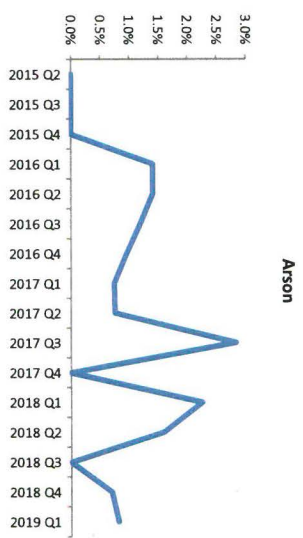
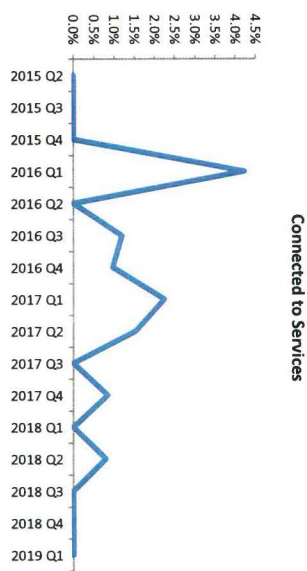
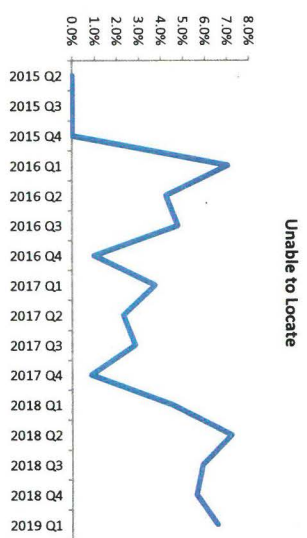
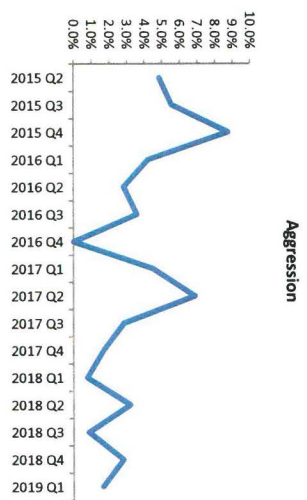
Other



Sex Offender



REASON FOR DECLINE-PERCENT OF DECLINES BY QUARTER (CONT):

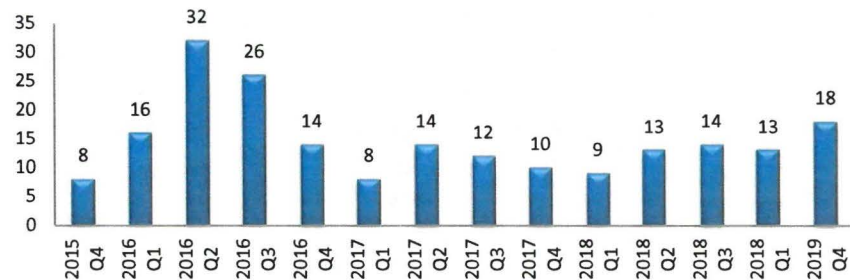


Supportive Transitions & Stabilization Referrals

INDIVIDUALS REFERRED:

For 2019 Q1, there were 18 people that were referred to the STS program for follow-up service. Furthermore, from 2015 Q4 through 2019 Q1, there have been a total of 207 individuals referred; and average of 14.8 per quarter.

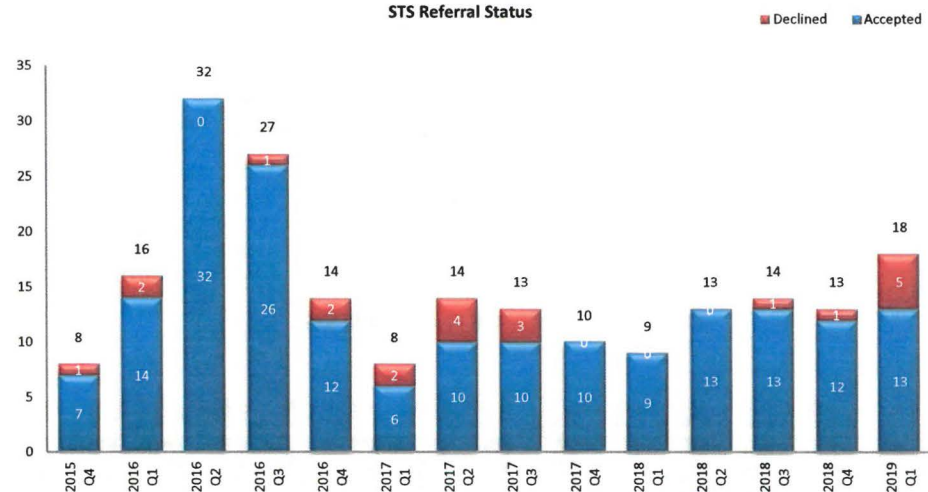
STS Individuals Referred



REFERRAL STATUS:

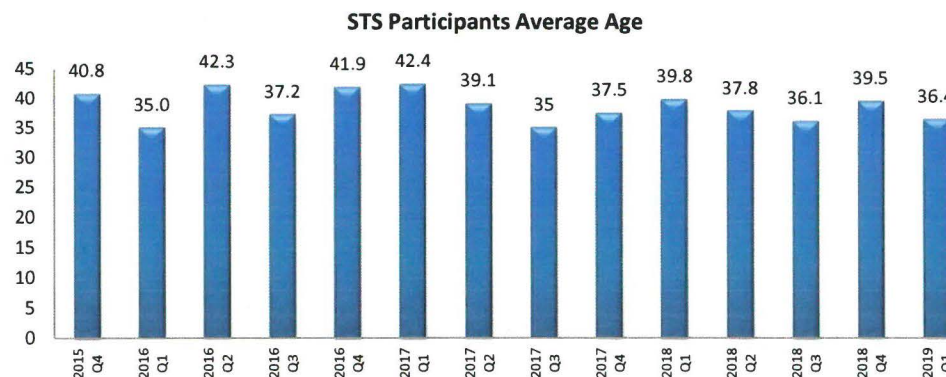
From 2015 QTR 4, through 2019 QTR 1, there were 209 referrals to STS, including individuals with multiple referrals. This is an average of 14.9 per QTR. Also, the STS has accepted 89% of all referrals into the program.

STS Referral Status

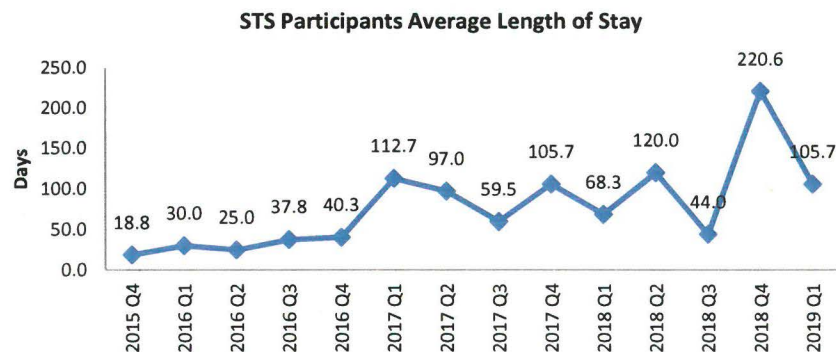


AVERAGE AGE:

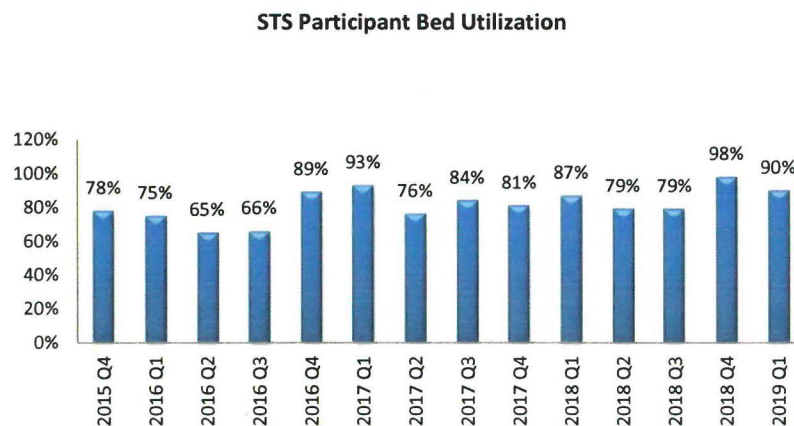
For 2019 Q1, the average age of the individuals who participated in the STS program was 36.4. Overall, the average age of all of stay of all STS participants is 38.6.

**AVERAGE LENGTH OF STAY:**

For 2019 Q1, the average length of stay of the individuals who participated in the STS program was 105.7 days. Overall, the average length of stay of all STS participants is 77.5 days.

**BED UTILIZATION:**

STS bed utilization is calculated by dividing the number of possible days each participant has the ability to be in the STS program, by the actual days that the beds were full. For 2019 Q1, the bed utilization rate was 90%. Overall, the bed utilization rate is 81%.



E. Service Coordination Team

112. The Service Coordination Team (“SCT”), or its successor, shall serve to facilitate the provision of services to individuals who interact with PPB that also have a criminal record, addictions, and highly acute mental or physical health service needs.

Status	Substantial Compliance
Analysis	<p>PPB reports that the SCT program continues to serve its designated population, providing access to supportive housing, intensive case management, medical care, addiction and mental health treatment. The SCT has collaborated with Central City Concern, the Law Enforcement Assisted Diversion (LEAD) program, the Community Peace Collaborative, the Downtown Public Safety Action Committee, the JOINT Officer of Homeless Services, PPB’s Neighborhood Response Teams, and Cascadia. The SCT has received national recognition for its successes, including at the 2018 Police Executive Research Forum. The SCT also presented at the 2018 CIT International Conference.</p> <p>As the Compliance Officer reports, a qualitative and quantitative assessment shows the SCT has reduced the number of arrests among community members accepted for SCT participation, as well as increased levels of employment and housing. ECF 182-2 at 26, 45-50 (concluding that the “SCT is a valuable component of the City’s overall response to mental health” that “reduced arrests/custodies, improved employment, and improved housing,” such that “SCT is operating in accordance with the letter and the intent of the Settlement Agreement).</p>