We must build a better street response

Just under three hours south by train and I was in Eugene, there to witness their mobile crisis support program, CAHOOTS. I wasn't the only one to do this. In the last couple of months, Portland Mayor Ted Wheeler, Police Chief Danielle Outlaw and Commissioner Jo Ann Hardesty's staff have all come to Eugene to learn about CAHOOTS (Crisis Assistance Helping Out On The Streets).

It's clear we need a new model in Portland. Too many unhoused people are arrested, too much policework is tangled with non-criminal matters involving

homelessness, and too many people call 911 for non-emergencies. We have consistently been arguing in Street Roots that as long as we deal with homelessness with a police response, people's lives will be needlessly entangled in the legal system.

CAHOOTS began when the

OFFER YOUR INPUT

commissioners to prioritize the

enforcement street response team.

You can give your input by attending

written testimony to the City Budget

Office. Learn more at portlandoregon.

a community forum or submitting

Tell the mayor and city

gov/cbo

development of a non-law

Eugene police approached the White Bird Clinic in 1988, seeking a mobile unit for reaching people in crisis whose actions were not criminal. They are "behavioral health first responders" operating in pairs, explained Tim Black, CAHOOTS operations

coordinator. One medic and one crisis worker each receive a minimum of 500 hours of training in the field as well as 30 hours class-time.

I joined Amy May, the crisis worker, and Manning Walker, the medic, for their shift. Each wore a navy jacket printed with CAHOOTS in white letters. May drove the van, her hands covered in knit, rainbowpatterned fingerless gloves. Walker fielded dispatch calls through an earpiece. Using the same channels as the police, a dispatcher patched through both 911 and non-emergency

calls. I sat behind them, wedged next to a baby seat, a box of bottled water and containers of instant noodle soup.

Our 911 system in Portland is clogged with so-called "unwanted person" calls, and plenty of the calls that CAHOOTS responded to fit that bill. The first call was to transport a man, scabbed-up and tipsy, to a safe place to sober up. Later they fielded a call about a shouting and distressed woman wearing a pink coat and leopard-print boots. Walker and May had met her before, and they understood her patterns of behavior. They talked to her calmly and moved on.

Another call took them to the rows of university fraternity and sorority houses. Someone reported a man sleeping in the alley. When May asked that man his birthday, he began to roll through possible numbers like a ticker tape in a DMV waiting room. His thoughts were disassociated, but he recognized safety with CAHOOTS. He accepted a bottle of water and a can of sausages, and decided to ride over to the White Bird Clinic.

Then there was the man leaning aside a convenience store, out-of-sorts. He needed wound care, so Walker calmly spread paper towels on the van floor as he knelt and talked with the man, caring for his wound. Through patient conversation, Walker ascertained the man needed to get to a cancer clinic, so they drove him there. Because they prioritized listening, Walker and May sometimes could determine other factors that contributed to distress.

When a woman called 911 because she found a hypodermic needle in a flowerbed, May maneuvered

the van to Eugene's western edge, the suburban sprawl along wetlands. The woman invited them inside her living room – ornate, slightly Victorian – and handed them the needle in a plastic bag. She had already plucked the needle so that her dog didn't fetch it like a bone, she said as Walker deposited the needle into a sharps dispenser. He explained to me later that they treated each call as important – they never knew what story might lie *beneath* the story.

I rode along for only one call in which both CAHOOTS and the police were dispatched. A woman, slurring and desperate with pain, posed a danger to herself. Walker and May spoke to her kindly, gathering her medicine, phone and coat as they prepared to transport her to the psychiatric wing of the hospital. As both CAHOOTS and police walked with her down the stairs of her apartment building, she talked about how she hoped God had a plan for her. One of the police officers turned to me to tell me how grateful he was to have CAHOOTS. Without them, he explained, the police would have to put the woman in custody, handcuffing her to transport her. That would surely add to her trauma.

Throughout the day, Walker and May addressed people's physical and mental pain. They showed up

for people because, as May said, "we live in a world that promotes isolation." No calls required handcuffs or a jail cell.

CAHOOTS vans are clearly marked with a red logo, a dove gripping maple leaves. At one traffic stop a teenager in a plaid shirt ran up requesting – and receiving – a bottle of water. In their downtime they switched from crisis workers to outreach workers, building trust.

Learning from CAHOOTS, Portland must build an

alternative big enough and visible enough to communicate widely that a non-police response is available. There are many people doing good work in Portland, but what we need is a system that supports that work on a large scale.

We need a big response.

This issue of Street Roots, we are offering a plan for a team we're calling Portland Street Response. This would be a non-law enforcement system of six well-marked mobile response vans teamed with a specially-trained firefighter-EMT and peer support specialist dispatched through both 911 and non-emergency channels.

We need a sense of urgency. In the worst of moments, these are issues of life and death. Commissioner Jo Ann Hardesty's office is proposing a pilot program through the Bureau of Emergency Communications that, we argue, could become Portland Street Response. But to make this happen, there's a clear first step: The city must fund someone to develop that program. Decisions about the city budget are happening now, so Street Roots will be knocking on the doors of City Hall, and we expect plenty of people in our community to join us. As it stands, the City Budget Office has recommended against funding this position, and even if it is funded, the timeline is in excess of three years. We must act faster.

Turn to page 6 to read about the situation we face, and read more on our plan on page 10. And then let's get to work!

Street Roots

211 NW Davis St. Portland, OR 97209 503-228-5657 Fax: 503-227-3117 www.streetroots.org news.streetroots.org

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Staff

Executive Director Kaia Sand kaia@streetroots.org Executive Editor Joanne Zuhl

joanne@streetroots.org

Development Director Andrew Hogan

andrew@streetroots.org

Senior Staff Reporter Emily Green

emily@streetroots.org **Vendor Manager** DeVon Pouncey
devon@streetroots.org

Administrative Assistant Kayla Jones Volunteer Goordinator Meghan Murphy, Jesuit Volunteer

Development Assistant Nina Lee **Editorial Producer** Monica Kwasnik **Reporters** Sarah Hansell, Leonora Ko, Emilly Prado, Ellena Rosenthal, Amanda Waldroupe, Helen Hill, Jason Cohen, Stephen Quirke, Libby Dowsett

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Kaia Sand is the executive director of Street Roots. You can reach her at kaia@streetroots.org. Follow her on Twitter @mkaiasand



PORTLAND KNOWS ITS RESPONSE TO STREET HOMELESSNESS IS INADEQUATE, BUT DOES IT KNOW HOW TO FIX IT?

BY EMILY GREEN

ortland knows it has a problem: Every day, costly police resources are dispatched again and again to handle low-priority calls for service involving people experiencing homelessness and behavioral health issues on Portland's streets. One Neighborhood Response Team officer reported spending 90 percent of a typical day responding to citizen reports of homelessness in a survey of city staff that Portland State University students recently

These aren't the calls police officers joined the force to answer, and much of the time, these calls don't warrant a response involving a badge and a gun.

And it's not just police. The same survey, and its resulting report, found city employees working for other bureaus, including Portland Parks and Recreation, Bureau of Development Services and Portland Bureau of Transportation, as well as at City Hall, find themselves working on issues around homelessness anywhere from 15 minutes to eight hours per day. Some

reported that time is spent working on policy planning and service coordination, but the most common tasks involved rule enforcement.

The report's authors, then-graduate students at PSU's School of Social Work, Kathleen Evans, who works for Multnomah County at the Joint Office of Homeless Services, and Katherine Lindsay, call this the "invisible spending" on responses to street homelessness.

The survey sampled only 3 percent of city staff, but even among that small sample, it revealed an estimated \$3.6 million spent annually on hours reallocated to street homelessness. That's in addition to money spent on camp clean-up activities with the city's One Point of Contact program.

With such a small sample surveyed, Evans and Lindsay conclude "true spending on this issue is much deeper" than what they captured in their analysis, released last spring. (See page 12 for more on this

Expensive first-responder resources are the most frequently used. Portland's Bureau of Emergency Communications, or BOEC, received 24,530 calls in which the caller

said they were calling about a situation related to homelessness through 911 and the police non-emergency number in 2018, according to data pulled at Street

Roots' request. More than 80 percent of those calls were categorized as low priority.

When police show up to deal with nuisance and behavioral issues, it can result in an arrest, creating additional barriers to accessing housing and employment for the individual in question.

It can also come at an additional cost to taxpayers if the person is jailed and run through the court system. If the subject is found mentally unfit for prosecution, then a stay in the Oregon State Hospital will ensue as they are stabilized, to

See RESPONSE, page 7

Special Report

DIRECTOR'S DESK: We must build a better street response. Page 3

RESPONDERS: These are the teams that address concerns and complaints related to people experiencing homelessness. Pages 8-9

SOLUTIONS: Street Roots lays out a feasible plan for the future of crisis and nuisance intervention. Pages 10-11

THE RIPPLE EFFECT: Academic paper offers insight on invisible costs of homelessness, Page 12

RESPONSE, from page 6

the tune of \$1,364 a day in 2018. In worst-case scenarios, a person experiencing a mental health crisis or an acute reaction to drugs or alcohol can lose their life as the situation escalates.

Since the beginning of 2017, Portland police have shot at seven people experiencing a mental health crisis and six people under the influence of drugs or alcohol, according to a list maintained by the Mental Health Association of Portland.

Of those, seven died.

Portland's over-policing and criminalizing of people experiencing homelessness and struggling with mental illness have grabbed recent headlines. In the process Portlanders learned the scope of the problem is much greater than ever imagined: The Oregonian's explosive report last year revealed that 52 percent of all arrests in 2017 were of people identified as homeless, and Willamette Week's recent report on BOEC's 911 dispatch center showed Portlanders call 911 to complain of an "unwanted person" more than any other reason. In 2018, more than 133,000 "disorder" calls were received, including nearly 29,000 calls about an unwanted person, according to the report.

About 100 miles south, a more compassionate and fiscally responsible model for handling issues that arise on the streets has also been getting attention in recent months. An article in the Wall Street Journal highlighted the program in November, and in January, Mayor Ted Wheeler paid the program a visit.

For 30 years, CAHOOTS (Crisis Assistance Helping Out On The Streets) has been dispatched through 911 to respond to behavioral issues on the streets of Eugene and Springfield. In 2017, it handled roughly 17 percent of calls requesting police services.

Unlike Portland's most-utilized mental health crisis response team, Project Respond, CAHOOTS does not typically bring a police escort along with it on calls.

With an annual budget of \$1.6 million, and just two vans, CAHOOTS responded to more than 23,000 calls for service in 2018.

Each two-person CAHOOTS team includes a nurse or EMT and a crisis worker with mental health experience who are dispatched through emergency communications systems (911 dispatch) and directly through CAHOOTS' own crisis line. These teams respond to mental health crises, issues involving homeless persons, intoxicated persons and other situations on the streets.

Police accompanied CAHOOTS on fewer than 30 percent of those calls, and the majority of the time police were present, program manager Tim Black said, it was because police called CAHOOTS to take over on a call they had initially responded to, and once CAHOOTS arrived, they disengaged.

"We rely on extensive training in scene awareness and compassionate communication and verbal de-escalation to prevent things from becoming physical," Black said. "This training covers everything from identifying potential environmental hazards to not blocking exits, doorways when in someone's living space, utilizing postures and dialogue which minimize the perception of threat, and being mindful of



HOTO BY EMILY GREEN

Portland's Bureau of Emergency Communications received 24,530 calls through 911 and the police non-emergency number related to people experiencing homelessness in 2018. More than 80 percent were categorized as low priority.

the small non-verbal cues that a patient may be escalating." Teams do not carry defense weapons, such as pepper spray or Tasers.

A Street Roots editorial suggested in December that it's time for Portland and Multnomah County to prioritize creating a similar first responder program here – one that's responsive to the needs on our streets and doesn't involve police.

We realize the impacts of street homelessness are a symptom of much larger issues: skyrocketing housing costs, ongoing opioid and meth epidemics, lack of access to mental health and substance use disorder treatment programs for those who need them most, and a disappearing federal safety net.

However, while long-term efforts to address Oregon's root causes of homelessness are underway, Portland continues to subject its most vulnerable residents to additional trauma and barriers, and it subjects taxpayers to increased costs when it fails to respond to people struggling with homelessness in an appropriate manner.

This is not about solving homelessness. This is about solving the way the community responds to the symptoms of homelessness.

As the city's budget cycle commences, Street Roots decided to take a deeper look at ways the region could feasibly, quickly and effectively address the crises on our streets in a compassionate and responsive way.

But first, let's take a look at steps the city and county are already taking.

Since November, Portland Police Bureau has stationed a rotating sergeant to assist with low-priority calls in the 911 dispatch

center.

According to a 26-year veteran dispatcher at BOEC, Sandi Goss, this sergeant often reaches out to callers to explain, for example, that it is not illegal for a person to sit on a sidewalk and that police will not be able to do anything about it. If the caller insists, an officer may still visit the scene, but oftentimes this initial over-the-phone discussion can resolve the request for service.

To date, BOEC estimates this position handles 9 percent of calls for police in some fashion.

But more changes could be coming to the way calls are dispatched through BOEC. Commissioner Jo Ann Hardesty, who oversees the bureau, is spearheading a three-year pilot project. In part, BOEC is switching to a new software program, ProQA, for screening medical and fire calls. It's the same software that's used in Eugene, and eventually it will include police dispatch as well. This will allow dispatchers to more uniformly assess calls, and it can be formatted to include a street response team.

The transition to this software began before Hardesty took the helm, and it will include a nurse triage. Lower-acuity medical calls might be transferred to the nurse, or the nurse might be accessible to the public through a separate phone number – or both. The nurse triage would divert non-emergency calls away from expensive ambulance and emergency room services.

According to Hardesty's staff, the threeyear pilot project could also include a response team that's similar to Eugene's CAHOOTS. It could be an expansion of a response service already active in Portland, or it could be an entirely new program. The idea is still in its early stages.

The strategic plan for BOEC that was completed in late February sets a target date of October 2022 for launching a small-scale pilot program, pending the results of framework development and stakeholder engagement. An actual citywide response team would not be implemented for three years and seven months, at minimum – if it were to pan out.

But that timeline applies only if the city budget for next year includes \$187,000 in funding that will pay for someone to develop the program – and the City Budget Office has recommended against funding that position.

Until a better street response is implemented – if the trends of the past 30 years continue – additional lives will be lost during police interactions with people experiencing mental health and substance use disorder issues on Portland streets, and thousands of arrests and prosecutions involving low-level livability crimes will be inflicted upon the city's homeless population.

The city is, however, moving forward with a \$1.2 million police bureau pilot program that will send non-sworn police personnel to respond to low-level disorder calls. This program has not yet been implemented.

On the following pages, we take a look at non-law enforcement programs already responding to public safety and health issues on Portland's streets and ask the question: Are any of these programs suitable for an expansion, or does Portland need to create a new response team – one that does not involve the police bureau?



One Point of Contact

One Point of Contact is an online portal where

Portlanders can file complaints about homeless

website, enter the location and photos of a camp

or camper, along with their complaint or concern.

This system is used primarily to address garbage.

homelessness - and to pinpoint higher-risk camps

employees of Central City Concern's Clean Start

camps within the city. Users log into the city's

sanitation and other material impacts of

Most typically, once a complaint is received,

program will visit the site to pick up trash and

not causing any significant problems, the

response is limited to trash removal. In some

cases, other support services may be initiated,

such as supplying Dumpsters, portable toilets or

Outreach teams are notified when Clean Start or

Medicine, and mental health issues are referred to

emergency to report an encampment or sanitation

issues arising from an encampment are referred

the person who files the report identifies an

extremely vulnerable person. Minor medical

issues are often referred to Portland Street

Many callers who dial 911 and police non-

survey conditions. If it's determined the camp is

posing a significant public safety threat, it will be

scheduled for posting and removal. If the camp is

for removal.

syringe drop boxes.

Project Respond.

to this program.

IF NOT 911, THEN V

These are the teams called upon to solve public saf people experiencing homelessness in Portland. The that many Portlanders are over-utilizing 911 and

Portland Street Medicine

assistance with non-life-threatening medical issues affecting people experiencing homelessness. It takes referrals from street outreach teams, TriMet, Union Gospel, Portland's One Point of Contact and the Portland parks bureau, as well as other proactively visiting people where they're at, offering clinical services. Portland Street Medicine offers first aid and over-the-counter for non-controlled medications. Teams include

Established: 2018 Number of vehicles: 1

clinicians, 6 administrative volunteers

occurs within 24 hours, and a site visit within a

Number of calls and referrals in 2018: About 100

Number of people served last year: 500

Referrals from police: None

Annual budget: \$50,000 in 2018; \$150,000 projected for 2019

Public funding: None, supported through

Hours of operation: 5 to 9 p.m. Mondays and

TO REQUEST SERVICES: Call 503-501-1231

IF NO ONE ANSWERS: Leave a voicemail that includes your name and contact information; the name, description and location of the person you're calling about, as well as the medical concern; and whether the person you're calling about has indicated they're open to receiving services from Portland Street

This all-volunteer team responds to requests for

organizations. It also performs its own outreach. medications and writes one-time prescriptions a licensed independent provider, a registered nurse and a social worker.

Number of volunteers: 25 clinicians, 4 non-

Typical response time: A phone call follow-up

donations

10 a.m. to 5 p.m. Fridays

Cascadia's Project Respond Mobile Crisis Team serving Multnomah County

Project Respond has multiple 24-hour-a-day, seven-day-a-week mobile crisis units that respond to calls referred from police and dispatched through the Multnomah County Mental Health Call Center. These teams of mental health professionals respond exclusively to mental-health-related crises. During the past fiscal year, 25 percent of calls were to assist someone who was also experiencing homelessness, according to monthly reports Project Respond submits to Multnomah County. Teams typically arrive with a police escort, so while police may take a back seat in most situations, they are not removed from the response. Cascadia Behavioral Healthcare runs Project Respond with funding from Multnomah County. Portland Police Bureau also contracts with Project Respond for mental health professionals who ride along with its Behavioral Health Unit's Mobile Crisis Unit.

Established: 1993 as a street outreach team; first contracted as a 24-hour crisis response team in 2001

Number of vehicles: 9, however these are shared with several follow-up teams, and sometimes staff use their personal vehicles

Number of employees: 24 clinicians on the crisis response team plus follow-up teams and supervisors, totaling 53 employees; this does not include on-call staff

Median response time 2018: 22-26 minutes

Number of mobile crisis teams: Ranges from 1 to 6, with an average of 2 to 3 teams active at the same time.

Number calls and referrals in 2018: 2,410

Referrals from police: 629

Annual budget for Project Respond Crisis Team: \$3.5 million for the county-funded mobile crises units and two follow-up teams

Public funding: 100 percent Hours of operation: 24/7

TO REQUEST SERVICES: Call the Multnomah County Mental Health Call Center at 503-988-4888 or toll free at 800-716-9769 (hearing impaired, dial 711)

VHO RESPONDS?

ety concerns and medical issues that arise among ese teams often respond to the types of situations the police non-emergency number to report.

Central City Concern Hooper Inebriate Emergency Response Service (CHIERS) & **Sobering Station**

CHIERS picks up people who are severely intoxicated or suffering acute reactions from drugs when police or community members summon its mobile unit. CHIERS deliver these individuals to its Sobering Station, where they can sober up safely. Staff then attempts to connect the individuals with recovery resources once the intoxication subsides. Central City Concern operates this program with funding from the city of Portland.

Established: 1971 Number of vehicles: 1

Number of employees: 27 for CHIERS mobile unit and Sobering Station

Average response time: Unknown; Central City Concern cannot pull this data because "it's all on paper"

Number of admissions to the Sobering Station in 2018: 3,084

Referrals from police: 2.084 Annual budget: \$1.7 million Public funding: 100 percent **Hours of operation: 24/7**

TO REQUEST SERVICES: Between 1:45 p.m. and 11:45 p.m. seven days a week, call 503-238-8132. During off hours, call the police nonemergency line at 503-823-3333.

Top left: Sandi Goss is a dispatcher at BOEC. PHOTO BY EMILY GREEN

Top right: CHAT team response vehicle. PHOTO BY EMILY GREEN

Right: Portland police stand near the perimeter of Village of Hope camp after sweeping it in February 2018. PHOTO BY KAIA SAND

Portland Fire and Rescue's Community Health Assessment Team (CHAT)

Firefighter Tremaine Clayton manages the CHAT team, and he's also the only person on it. He follows up with people the fire bureau identifies as high-utilizers of 911 to help mitigate their reasons for frequently relying on expensive emergency services. These high utilizers can call 911 five or six times in one day - most frequently for falls. Once he mitigates a high-utilizer's reasons for calling, either by moving them to a nursing facility or into rehab or in some cases just speaking with them about other resources, they move off his list and are replaced by another high-utilizer. Clayton also visits homeless campsites after fire incidents to teach residents fire safety in order to prevent future out-of-control blazes. He also provides first aid and offers items such as socks and water to campers he encounters.

Established: 2016 Number of vehicles: 1 Number of employees: 1 Number of clients at a time: 27

Number of current clients experiencing homelessness: 6

Effectiveness: Has cut 911 call volume from clients by 50 percent, amounting to 550 fewer calls to 911 annually

Annual budget: \$155,500 Public funding: 100 percent Hours of operation: 7 a.m. to 3 p.m. Monday through Friday

CHAT does not take outside requests for services at this time but plans to expand its program.



Portland Patrol

This private security firm supplies foot, bike and Segway patrols in downtown Portland as a service funded though taxes collected from members of the business improvement district. These patrol persons, many of whom are former police officers, respond to complaints about panhandling, camping and suspicious persons, as well as other downtown safety and nuisance issues. Portland Patrol is not technically law enforcement but acts as an extension of law enforcement, working closely with Portland Police Bureau and the Multnomah County District Attorney's Office.

Beginning as soon as July 1, another geographically based private security force, Central Eastside Sidewalk Operations, will patrol the Central Eastside Enhanced Services District. This team, however, will also receive trauma-informed training and be accompanied by crisis workers trained in de-escalation, according to the district's plan.

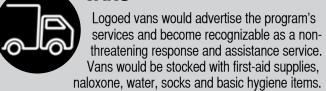


Continued from page 9

PORTLAND STREET RESPONSE

Street Roots lays out a feasible plan for the future of crisis and nuisance intervention in public spaces

VANS



TEAMS

One firefighter-EMT and one peer support specialist, both with additional de-escalation and behavioral health training.

These teams would be prepared to respond to calls about controlled fires burning in camps and tents, non-life-threatening calls for medical services on the streets, and an array of low-priority calls requesting police services, such as calls for unwanted persons, welfare checks and behavioral health issues.

A peer support specialist would have personal experience with mental health or addictions issues and a working knowledge of how to connect people with programs that initiate services. Teams would also receive de-escalation training similar to CAHOOTS, which primarily responds to and resolves situations without a police escort.

Teams would perform street outreach for fire- and medical-safety-related issues when not responding to calls. This would establish trust in the homeless community and give teams the opportunity to initially engage with some folks outside the context of a crisis.

With input from various public officials and agencies, as well as from Street Roots' position as an organization that works with people experiencing homelessness, we've imagined a street response team that would alleviate the drain on police resources and serve as an appropriate and compassionate response to street homelessness. This service would begin small

and focused on Portland

but would eventually

expand to serve the entire

metro region.

GOAL

Reduce police responses to calls for service involving people experiencing homelessness.

SCOPE

Up to six teams of two, operating mobile response vans 24 hours a day, seven days a week across Portland. Why six teams? While Portland Police Bureau did not answer our inquiry into how many teams it thought would sufficiently address low-priority calls involving people experiencing homelessness, staff at the 911 call center had some ideas. Dispatcher Sandi Goss suggested that three 24-hour teams in Portland - one in downtown, one on the north side and one on the east side - would be kept very busy, while BOEC's Operations Manager Lisa St. Helen said six teams spread across the metro area would be "a good start." For the purposes of this plan, we're focused on areas within Portland's city limits, but we're going with six teams to allow for some community outreach and meaningful interactions during peak times, with fewer teams operating during the night.

COST

At most, each 24-hour unit would cost about \$800,000 annually, including salary and operating costs. If all six units operated around the clock every day of the week, the program would cost about \$4.8 million per year. This figure, however, does not include start-up costs, such as training, or the cost of administration.

This cost estimate is based on Portland Fire & Rescue's cost of operating its Rapid Response Vehicle teams. These two-person teams of highly trained firefighter EMTs respond to lower-acuity medical calls in an SUV. Of the roughly \$800,000 it costs to keep one unit operational annually, nearly \$500,000 is for salaries of the six full-time employees needed to keep one unit operating around the clock 365 days a year.

ë, F

FUNDING

The city is already spending the money it would cost to implement a street response team to respond to homelessness in a disjointed fashion, in part through the reallocated hours spent among various bureaus. Additionally, funding slated for a

pilot project through the police bureau to address low priority calls could be diverted to a non-law enforcement approach instead.

A street response team would come at a cost savings. There would be fewer arrests and jail stays. Eugene's CAHOOTS operates at \$1.6 million per year and has estimated it saves the Eugene Police Department approximately \$8.5 million annually, however EPD argues these savings are hard to quantify.

A street response team would be a public safety program and should not take dollars away from programs aimed at fixing the root causes of homelessness.

WHAT THEY'LL DO

This team will respond to the bulk of disorder calls, including calls about unwanted persons, behavioral health issues, low-priority incidents at camps and other situations that arise on the streets, including non-life threatening medical needs. As such, this team will need tools when asking people to leave certain areas. This will require follow-through and investment from the city and county on shelters, housing and wrap-around services.



OPERATOR

Portland Street
Response would be run through Portland
Fire & Rescue, either as

an expansion of its existing CHAT (Community Health Assessment Team) program or as a third-party organization created for this purpose that works in partnership with the fire department.

DISPATCH

To start, Portland Street Response would be dispatched through BEOC when Portlanders call 911 or the police non-emergency line. Once BOEC's new software is up and running, it can screen for calls to be diverted to this response team.

In the meantime, the police sergeant and firefighter stationed at BOEC can assist in determining which calls are appropriate for the street response team. Eventually, Portland Street Response could also have its own number and dispatch, so callers who are familiar with the program could bypass 911 completely.

COMPILED BY EMILY GREEN