

Program # 25058A - Involuntary Commitment Investigators, Court Examiners

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Priority: Basic Needs Lead Agency: County Human Services

Program Offer Type: Existing Operating Program Contact: Sandy Haffey

Related Programs: 25059A, 25075

Program Characteristics:

Executive Summary

This is a mandated function that falls under the continuum of services for individuals who are at imminent risk of harm to themselves or others. The County is required by Oregon Revised Statute 426 to provide these services to residents experiencing a mental health crisis, regardless of their ability to pay or whether they are insured.

Program Description

Involuntary Commitment Program (ICP) Investigators and Mental Health Court Examiners are part of a continuum of care for adults with severe and persistent mental illness that directly links to the Basic Living Needs priority by providing safety while linking clients to comprehensive community supports and services to treat and stabilize their symptoms. Staff ensure that services are provided in the least restrictive environment, while making sure that the individual's civil rights are not violated. A physician activates an emergency hold when s/he writes a Notice of Mental Illness because it is believed the individual has a mental illness and is an imminent danger to themselves or others. ORS 426 requires the ICP Investigator to complete an investigation of the Notice of Mental Illness to determine whether the person rises to the level to recommend a commitment hearing. When staff recommends a hearing, the Court Examiners make recommendations to the judge. Statute requires at least one Court Examiner at each hearing; the circuit court of Multnomah County policy requires two Court Examiners be present at hearing. At the pre-commitment hearing, the Court Examiners provide a written report and recommendations to the judge as to whether the individual has a mental illness as defined by statute and outlines the basis for that decision.

Program Justification

The continuum of care provided by ICP Investigators and Court Examiners links directly to the Basic Living Needs priority by providing Crisis intervention services so that individuals can move quickly from crisis to stability, and by providing care and service coordination for individuals who are experiencing a mental health crisis, regardless of their insurance and/or ability to pay. During the time they are receiving treatment in the hospital, they are linked with other comprehensive social services and community supports to address the chronic and urgent needs of individuals with severe and persistent mental illness. This program links to the Poverty Elimination Framework by paying for adequate health care and needed social services for those at imminent risk of danger to themselves or others due to a mental illness while protecting the individual's civil rights. Staff work closely with County Post-Commitment and Residential Services, as well as Aging and Disability Services.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY04-05)	Current Year Purchased (FY05-06)	Current Year Estimate (FY05-06)	Next Year Offer (FY06-07)
Output	Number of Holds investigated	4,080	4,300	4,380	3,450
Outcome	% of Holds investigated in Statute timeframe (New)	0%	0%	0%	90%
Output	Number of Holds that went to hearing	356	370	380	345
Outcome	% of Hearings held in Statute timeframe (New)	0%	0%	0%	95%

Performance Measure - Description

1. ORS 426 mandates that an individual on an E-Hold must be contacted by the ICP Investigator within 72 hours and a hearing report must be available 24 hours before hearing. Measure #1 provides tracking for how effectively work unit meets Statutory requirement. Measure development is being initiated. 2. ORS 426 mandates that a pre-commitment hearing must be held within 5 business days, beginning 24 hours after the Emergency Hold is placed. Measure #2 provides tracking for how effectively work unit meets Statutory requirement. Systems are being initiated to capture this data. Approximately 9% of E-Holds result in a commitment.

Legal/Contractual Obligation

ORS 426

In its role as the Community Mental Health Program, the County is responsible for court examiners and ICP Investigators. The County retains financial responsibility for emergency holds regardless of whether it is the designated Community Mental Health Program.

Revenue/Expense Detail

	Proposed General	Proposed Other Funds	Proposed General	Proposed Other Funds	
Program Expenses	2006	2006	2007	2007	
Personnel	\$163,785	\$1,000,590	\$179,006	\$886,748	
Contracts	\$80,000	\$62,400	\$42,000	\$0	
Materials & Supplies	\$3,000	\$16,609	\$5,865	\$17,824	
Internal Services	\$12,221	\$178,038	\$32,135	\$137,250	
Subtotal: Direct Exps:	\$259,006	\$1,257,637	\$259,006	\$1,041,822	
Administration	\$0	\$0	\$10,262	\$35,360	
Program Support	\$0	\$0	\$29,703	\$51,475	
Subtotal: Other Exps:	\$0	\$0	\$39,965	\$86,835	
Total GF/non-GF:	\$259,006	\$1,257,637	\$298,971	\$1,128,657	
Program Total:	\$1,516,643		\$1,427,628		
Program FTE	0.00	0.00	2.11	9.46	
Program Revenues					
Intergovernmental	\$0	\$1,257,637	\$0	\$1,041,822	
Program Revenue for Admin	\$0	\$0	\$0	\$86,835	
Total Revenue:	\$0	\$1,257,637	\$0	\$1,128,657	

Explanation of Revenues

\$1,041,822 from State Mental Health Grant Award per 05-07 biennium contract.

Significant Program Changes

Last year this program was: #25055, MH Commitment Investigators ITAX

This year's program offer combines offers 25049 and 25055. The ICP Investigators and Court Examiners were rolled into one offer, given the Statutory requirement that the County maintain responsibility for both.

Movement of MHS 24 dollars to cover cost of E-Holds (#25075) decreased dollars for ICP staff by 3.43FTE. Loss of 3.43FTE will decrease number of holds that can be investigated. Anticipated holds for FY06-07 are 4500(PO 25058A&B). Total number that can be investigated will drop to 3450 and the number of Notice of Mental Illness cases taken to hearing will decrease from estimate of 450 to 345. Week-end staffing will be discontinued. Statutory timelines will be extremely difficult to meet. Length of Stay in Acute Care Hospitals will increase, resulting in increase in cost of E-Holds.