



Behavioral Health Crisis Services- A Collaborative Response

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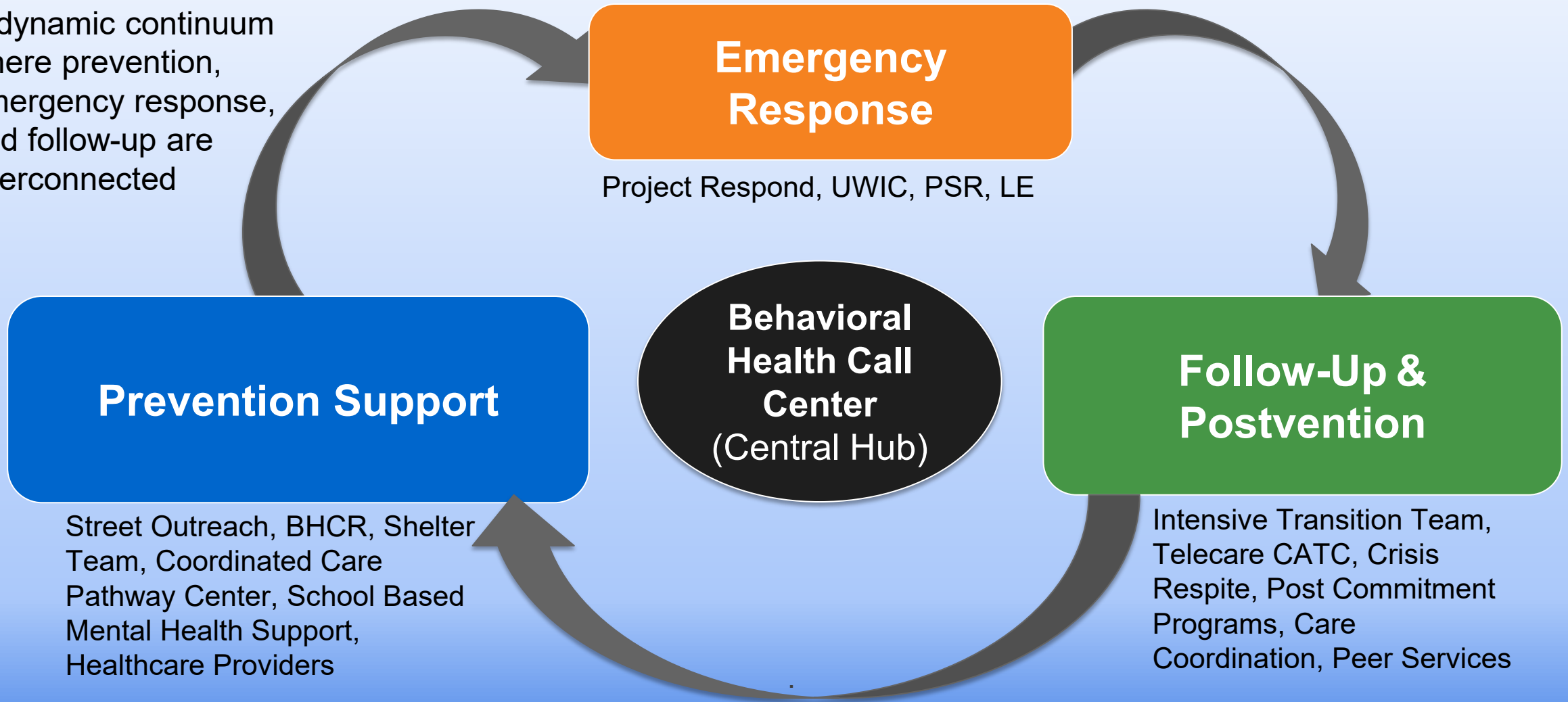
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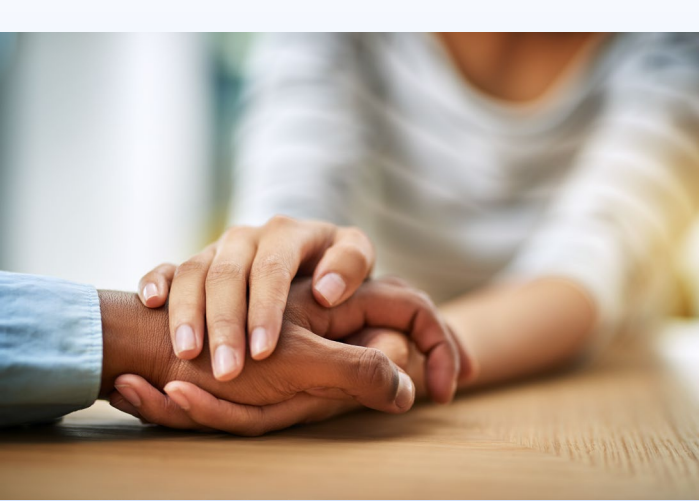
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Portland Street Response

Crisis Continuum of Care

A dynamic continuum where prevention, emergency response, and follow-up are interconnected



Each phase feeds into the next, promoting recovery, stability, and resilience



Behavioral Health Call Center

503 - 988 - 4888

The BHCC has served as the county's centralized hub for crisis response and behavioral health support for over two decades. Operating 24/7, BHCC connects individuals and families to immediate care, mobile crisis response, and ongoing mental health services.

In August 2025, BHCC achieved national accreditation from the American Association of Suicidology (AAS), recognizing its excellence in crisis intervention, suicide prevention, and adherence to the highest clinical and ethical standards. This milestone reflects BHCC's dedication to quality and compassionate service.

Every crisis call is answered by a Master's-level Qualified Mental Health Professional (QMHP) or higher. Our clinicians are trained in trauma-informed care, suicide risk assessment, and evidence-based practices to ensure that each caller receives expert, empathetic, and culturally responsive support.

Accredited • Compassionate • Clinically Excellent

Behavioral Health Call Center

503 - 988 - 4888

- Suicide rates among people experiencing homelessness are 9–10x higher.
- Oregon: 20 deaths per 100k vs U.S. 14/100k.
- 6,000+ unhoused individuals in Multnomah County (PIT 2023).
- Homelessness magnifies trauma, isolation, and barriers to care.
- Ending homelessness = suicide prevention
- Housing stability saves lives.



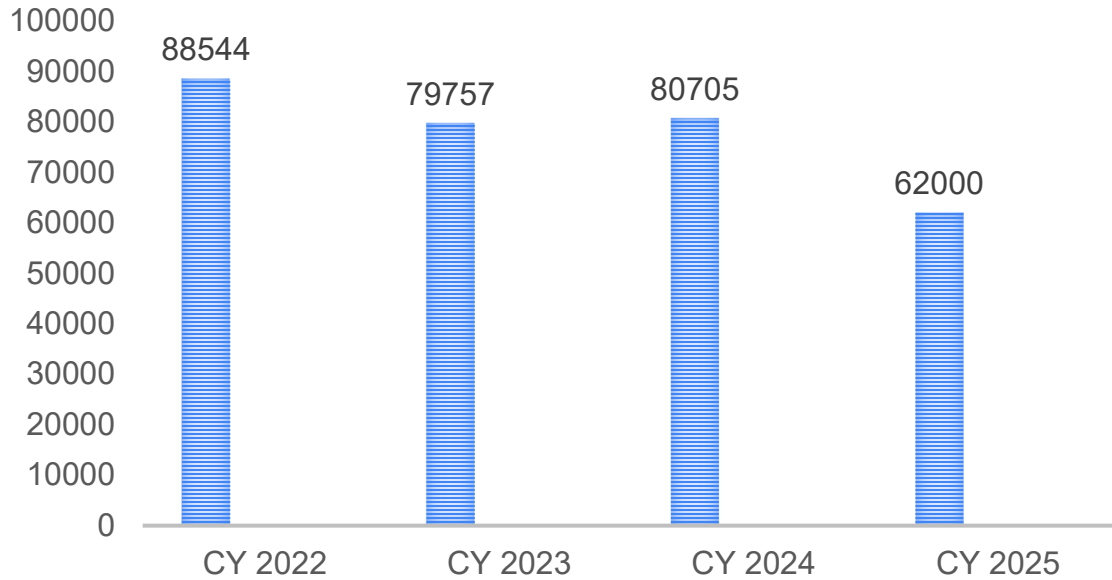
- 24/7 access point for crisis and suicide prevention.
- Trauma-informed, culturally responsive clinicians.
- Evidence-based tools: C-SSRS and CALM.
- Connections to urgent mental health care, Project Respond, and peer supports.
- County priority: align suicide prevention with housing stability.

Call BHCC anytime: 503-988-4888 —
your 24/7 partner in prevention.

Behavioral Health Call Center (BHCC) Data

Highlights

TOTAL INBOUND/OUTBOUND CALLS

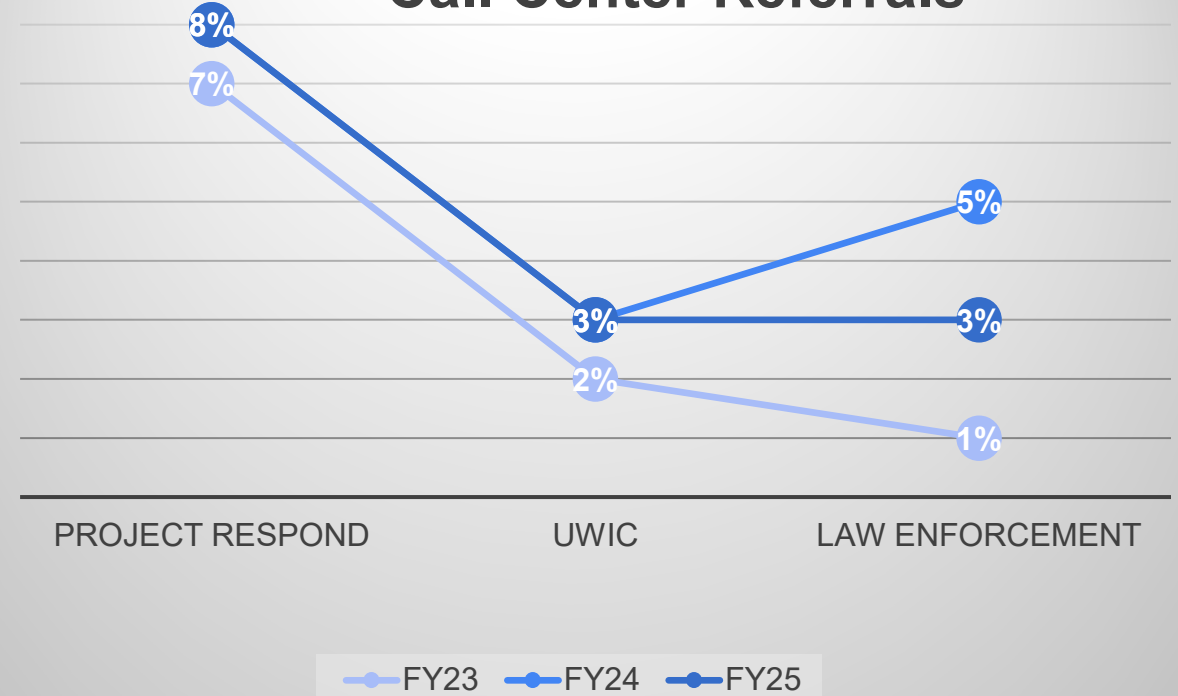


Key Increases:

- 🌐 Latine Mental Health Line: +291%
- 🚒 911 transfers from BOEC: +86%



Call Center Referrals



81% of all calls are resolved over the phone with no need for higher level of intervention services



What to expect when you call

Caller Information

- Name
- Organization
- Contact Information

Client Information

- Name
- Demographics
- Location

Assessment

- Current Concern (why today?)
- Relevant history
- Review Crisis Alert
- CSSRS; CALM

Plan

- Safety Planning
- Follow-up
- Care Coordination
- Recommend, Refer, Deploy

Crisis Alert System and System Coordination

**Client Demographics
and contact
information**



**Provider Information
and contact
numbers**



**Historical
Information**

Current Presentation and Situation

Current concerns, intervention strategies, helpful suggestions, what has worked in the past, what the hope is for resolving the situation, identified supports

Behavioral Health Resource Center

333 SW Park Ave
503 - 988-4100

7:00 am - 8:00 pm
BHRC Day Center Referral
Van phone: 971 -352-0582



8am -8pm daily

Services:

- Peers support
- Restroom
- Showers
- Laundry
- Lockers
- Computers and charging stations
- Basic wound care
- Activities
- Warm, safe place to relax





CASCADIA
WHOLE HEALTH CARE™

Project Respond

Lisa Stewart & Amber Rollins

Project Respond

Cascadia Health

Mobile Crisis - Project Respond

- 24/7/365
- Anywhere in Multnomah County
- Multidisciplinary teams of 2
 - Master's Level Clinicians
 - Bachelor's Level Clinicians
 - Peer Providers
- Respond within 1 hour
- Free
- Access to follow -up teams and support



Referral Criteria

- **How do we get referrals?**

- MultCo Call Center: #503-988-4888
- 911
- Portland Street Response

- **Who do we see?**

- Anyone in a MH crisis in MultCo
- Low-acuity crisis response
- High-acuity crisis response
- Face-to-face mental health assessment
- Welfare checks
- Follow-up support and referrals
- May facilitate voluntary and involuntary hospitalization (DCH)
- Youth and adult crisis response

- **Who can't we see?**

- Individuals in a medical emergency



What can someone expect?

If safety concerns are present, PR will likely co-respond with police. Some considerations include:

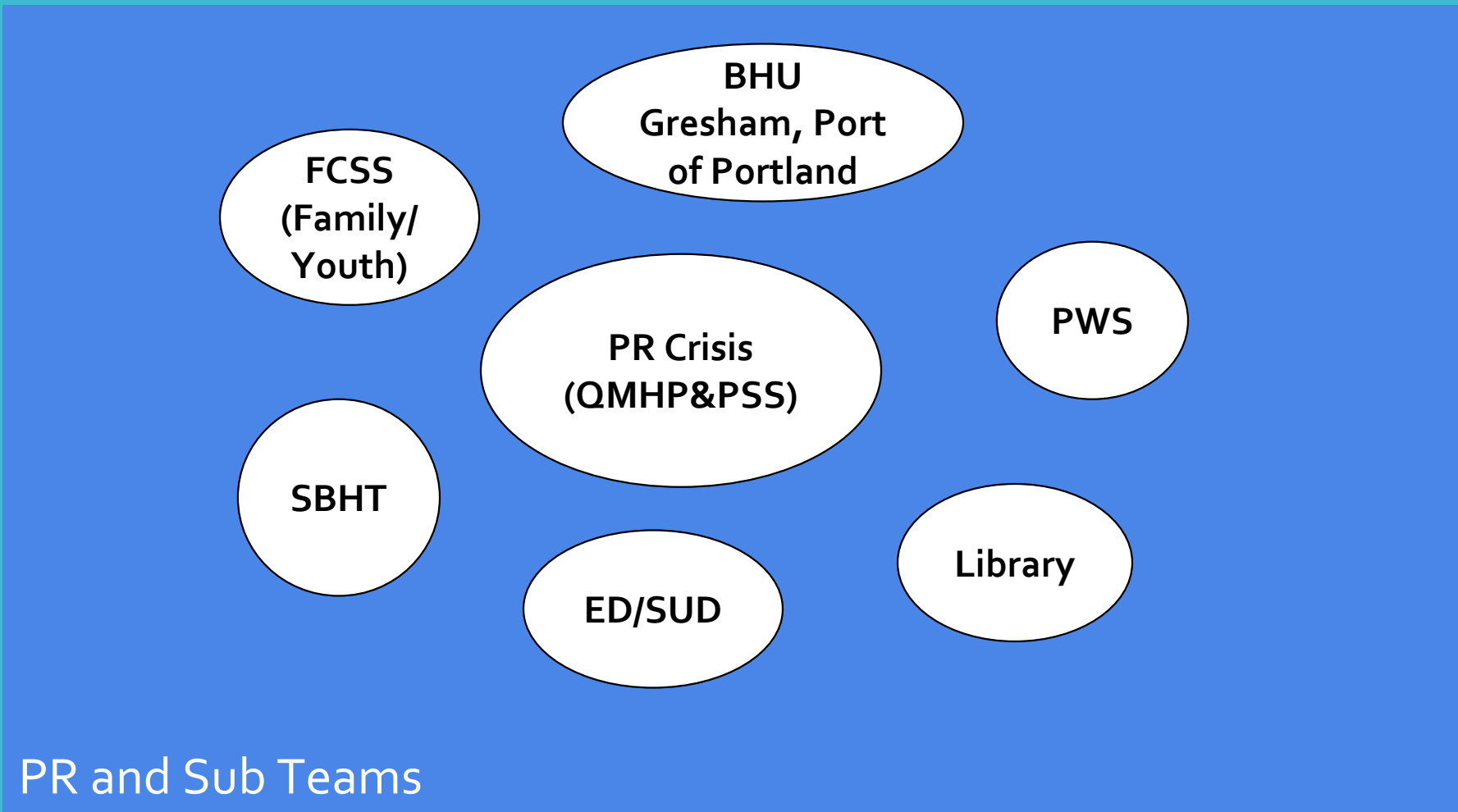
- History of violence
- Threats of violence
- Weapons
- Intoxication

We always consider least restrictive alternatives before involuntary hospitalization

- Director's Custody Hold
 - Oregon Revised Statute 426.233 defines the Authority of the CMHP Director and other individuals (Designees) to detain or place in custody a person who the Director or Designee has probable cause to believe is dangerous to self or others and in need of immediate care, custody or treatment for mental illness.

Outcomes

Outcome	Definition	% of total episodes
Community Plan	Client evaluated and determined that they can safely be in the community	83%
Director's Custody Hold or Police Hold Initiated	Assessment results determine that the person needs to be evaluated at the hospital and transported there involuntarily	11%
Referred to Hospital Sub-acute or Respite - Voluntary	Assessment results determined that client would benefit from brief and intensive stabilization services	5%
Jail	The number of incidents that result in the client being transported to jail.	.5%



1. PR Crisis (24/7)
2. Shelter (7 days a week 11-7:30pm)
3. BHU Gresham (M-Th)
4. FCSS(M-F)
5. PWS (M-F)
6. Library (M-F some weekends)
7. ED/SUD (ED-9-7:30 7/wk, SUD-M-F)
8. BHU Port of Portland

Shelter Behavioral Health Team (SBHT)



- Peer Specialists and QMHA Counselors
- Accepts referrals from shelter staff or self -referrals
- Provide drop -in counseling and low-acuity crisis response
- Peer Support for shelter participants
- 7 Days a week, 11 am - 7:30 pm

Urgent Walk - In Clinic

- 4212 SE Division
- M-F 7am -9pm
- All Ages
- Free
- Follow up supports



Thank You!

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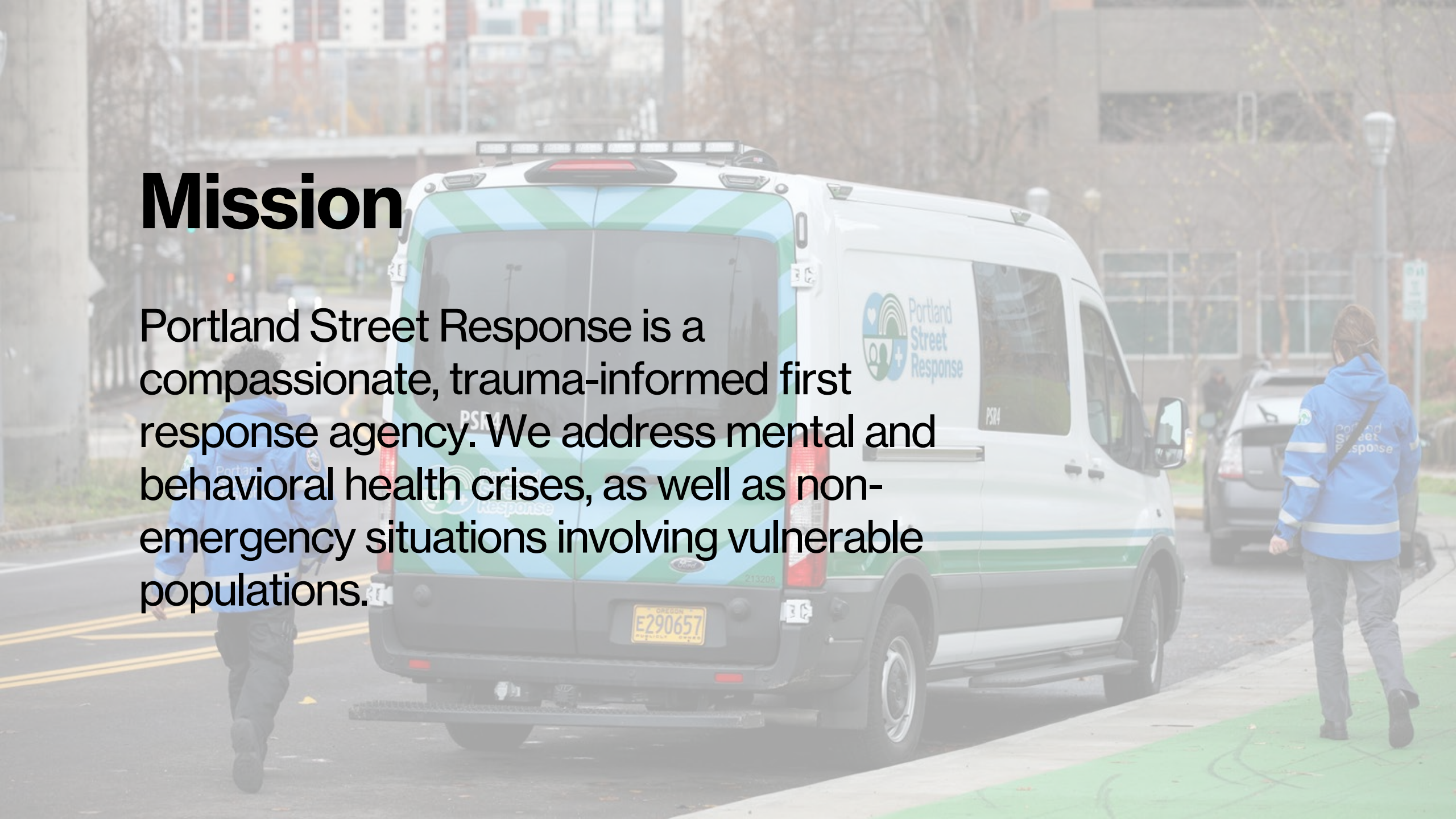


Portland
Street
Response

A First Response Program
Centered Around Mental &
Behavioral Health

Mission

Portland Street Response is a compassionate, trauma-informed first response agency. We address mental and behavioral health crises, as well as non-emergency situations involving vulnerable populations.



Program Goals

- Resolve immediate crisis through multidisciplinary care and resource/service connection.
- Provide timely follow-up to ensure patient stability in the community and prevent future crisis.
- Engage in community outreach, engagement, and education to disrupt cycles of crisis.



Our Multi-Disciplinary Team



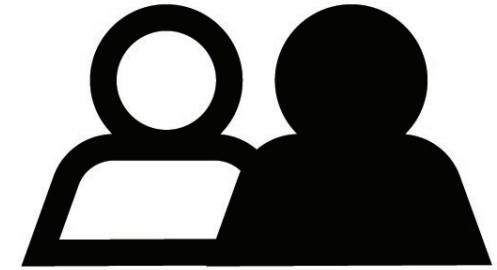
EMT

+



**Mental
Health
Crisis
Responder**

+



**Community
Health
Workers &
Peer Support**

What calls do we respond to?

- Low-acuity mental health crisis
- Substance use/intoxication-related crisis
- Trespass/disturbance (due to mental health/substance use)

What do we provide?

- Low-acuity crisis response and de-escalation
- Mental health assessments
- Arrange transportation to staffed facilities and shelters
- First aid and emergency medical services
- Case management and referrals
- May facilitate voluntary hospitalization
- Co-response with other bureaus, such as PBOT, PPB



How PSR Triage Calls

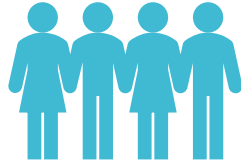
1. Down and unchecked

**2. First Responder Partner
Co-Response (i.e. AMR,
PF&R, and PPB)**

**3. Calls with multiple
complainants or mental
health crisis present**

**4. First Responder Partner
Referrals (i.e. AMR, PF&R,
and PPB)**

After Care Team



PEER SUPPORT:

- Emotional support & advocacy
- Connect individuals to food and clothing
- Assist with obtaining IDs
- Support with appointments
- Respond to 911 calls



COMMUNITY HEALTH WORKERS:

- Short-term case management
- Find temporary shelter
- Long-term housing applications
- OHP sign-up
- Referrals to other services
(mental health, substance use
treatment, etc.)

PSR is NOT available to respond to individuals who are:

Actively suicidal

Brandishing weapons or behaving violently

Located in private residences

Third party callers for homeless encampments without crisis indicators

Third party callers requesting supplies, resources, referrals, or shuttling without crisis indicators



New policies 2025

Shuttling: PSR responders can shuttle individuals if other methods of transportation aren't appropriate:

- Shelters
- Day use centers
- Food pantries
- Safe or trusted private residences

Response location: Can now respond inside certain public places including:

- Lobbies of gov't buildings during regular business hours
- Privately owned businesses that are open to the public (restaurants, retail or grocery stores during regular business hours)

New Phone Number: Request PSR by calling 911 or 503-823-7773. Both lines are answered by the same trained 911 call takers

Extended hours- New hours 6am-Midnight 7 days a week.



2025 budget calls for **14 additional staff**



Hour expansion



Districting: Place units in districts for better access to calls. Start with two districts later this year (east side/west side) along with a “wild” car to support busier areas and higher priority calls

Future growth

The right responder for the right call



PSR exists within the established First Response System for the city. As such, it rounds out the options available to residents in need of assistance.





Portland Street Response

- 0600 - Midnight/7 days a week
- Low-acuity crisis response and de-escalation
- Mental health assessments
- Arrange transportation to staffed facilities & shelters
- First aid & emergency medical services
- Case management & referrals
- May facilitate voluntary hospitalization

Project Respond

- 24/7/365
- Anyone in crisis within Multnomah County
- Multidisciplinary response team
- Embedded peer providers for initial response and follow up
- All acuity behavioral health crisis response, intervention, assessment, & referrals
- May facilitate voluntary & involuntary hospitalization (Director's Custody Hold)

Portland Police Bureau

- 24/7/365
- Police Officer Civil Holds (facilitation of voluntary & involuntary hospitalization)
- Crisis Intervention Patrol Response
- Enhanced Crisis Intervention Team
- Behavioral Health Unit/ Behavioral Health Response Teams
- Crisis Negotiation Team



Project Respond

