Houston Sobering Center – 2014 Update
Presented to
Public Safety & Homeland Security Committee
May 15, 2014
City’s Purpose for Creation

- The Houston Recovery Center is a non-profit Local Government Corporation formed by the City of Houston in 2012 to:
  - Divert Inebriates from Jail
  - Reduce Jail Population
  - Preserve Law Enforcement Resources
  - Preserve Medical Resources
  - Provide a chance for many to escape the revolving door of substance abuse and incarceration
Mission

• To provide a safe place for individuals to sober up and receive assistance appropriate to their individual needs with the goal of long-term recovery

Vision

• A fully-integrated recovery care continuum where anyone seeking help with a substance use disorder or a co-occurring substance use and mental health disorder can access appropriate levels of care in a timely manner
The cumulative total of diversions to the sobering center was 5,345 as of the anniversary date, April 10, 2014.
The average amount of time it takes an officer to admit someone to the sobering center is approximately 8 minutes.

In general, it takes 2 hours for an officer to book someone into jail for public intoxication.
Confrontations with publicly intoxicated prisoners in the jail has dropped by 29%.
Repeat Clients

As of May 1, these 161 repeat clients account for 972 diversions.
Care Coordination Planning Team

- Baylor College of Medicine
- City of Houston City Council
- City of Houston Mayor’s Office
- COH Health and Human Services
- District Attorney Harris County
- Harris County Office of Criminal Justice Coordination
- Harris County Psychiatric Center
- Harris Health System
- Houston Fire Department Health and Human Services
- Houston Police Department Mental Health Division
- Houston Recovery Center
- Mental Health and Mental Retardation Authority of Harris County
- Office of Harris County Court
- SEARCH Homeless
- St. Joseph Medical Center
- UT Health Science Center of Houston
Clients placed in Substance Abuse treatment facilities
April 10, 2013 - May 13, 2014

<table>
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<tr>
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<th>Number</th>
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<td>M</td>
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<tr>
<td>Grand Total</td>
<td>228</td>
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<table>
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<tr>
<th>Type of Service</th>
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<td>Lic. Residential Treatment</td>
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<tr>
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<td>Grand Total</td>
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Year One - What We’ve Learned

• Lack of community resources impact outcomes
• Many of the people we see are DESPERATE for help
• Persistence pays
• Follow-up telephone calls produce favorable outcomes
• Peer staff are very effective at building rapport
• Case management and peer support services are crucial
Phase II

• Recovery Support Services under 1115 Waiver
  ▪ Provide Comprehensive Case Management
  ▪ Purchase Detox Services
  ▪ Provide Peer Support Services
  ▪ Provide Community Based Peer Coaching
  ▪ Provide Telephone Follow-up
Summary

• We are positioned to do more

• The Center’s current resources are underutilized

• The most appropriate action is:
  ▪ expansion of key services
  ▪ expansion of key referring sources

• Efficiencies being achieved within HPD