



HOUSTON POLICE DEPARTMENT

MENTAL HEALTH DIVISION

2015 ANNUAL REPORT



Professionalism

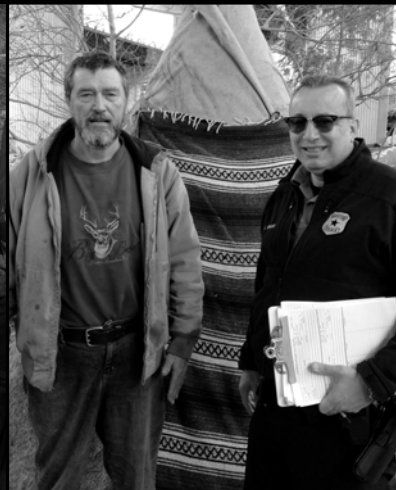
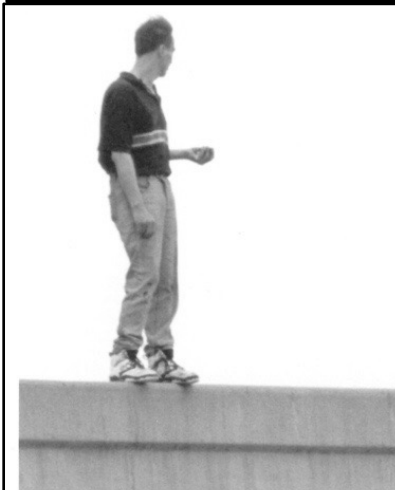
Collaboration

Our Focus

Community

Service

Safety





Martha I. Montalvo
Acting Chief of Police



Michael A. Dirden
Executive Assistant Chief



MENTAL HEALTH DIVISION MANAGEMENT

(left to right) Lieutenant Cheryl Southwell; Sergeant Rodney Hill, Crisis Intervention Response Team; Sergeant Ramon Perez, Training & Administration; Captain Wendy Baimbridge; Sergeant Stephen Wick, Homeless Outreach Team; Sergeant Julio Silva, Crisis Intervention Response Team; Sergeant Roger Espinoza, Investigations. (Not pictured Sergeant Joseph Ramirez, Crisis Intervention Response Team.)



THE HARRIS CENTER MANAGEMENT

(left to right) Kisha Lorio, LPC, NCC, Clinical Team Leader, CIRT; Cherie Steinberg, LPC, CCSI Program Director; Amber Honsinger, LPC, CCSI Clinical Team Leader; Kim Kornmayer, LCSW, Assistant Deputy Director, Comprehensive Psychiatric Emergency Program; Ann MacLeod, LPC-S, NCC, CIRT Program Director; Laura Perez, LPC, Clinical Team Lead, Crisis Call Diversion Project; Jennifer Battle, LMSW, HelpLine Director.



HARRIS CENTER PERSONNEL ASSIGNED TO THE MHD

MHD SQUADS



Investigations



Administration



Chronic Consumer Stabilization Initiative



Homeless Outreach Team



Crisis Intervention Response Team



Training

Mental Health Division Organizational Chart

Houston Police Department 2016



Mental Health Division

Captain W. Baimbridge

Lieutenant C. Southwell



Community policing comprises three key components:

Community Partnerships

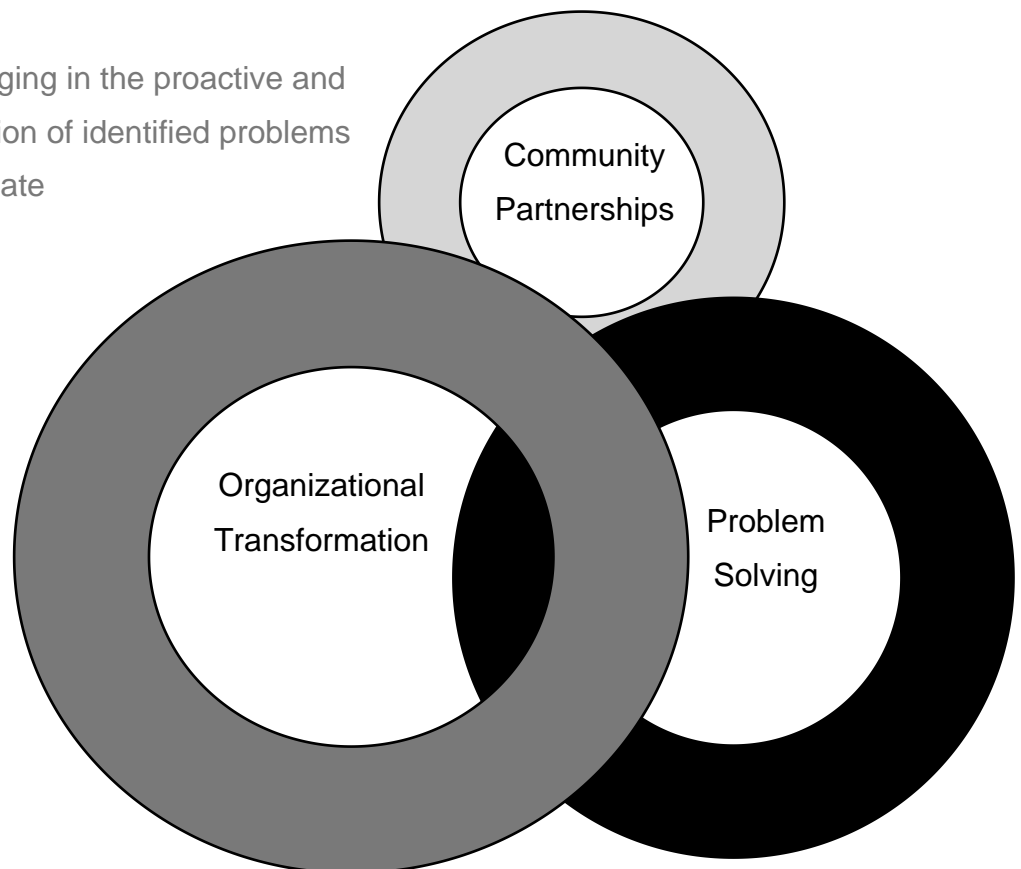
Collaborative partnerships between the law enforcement agency and the individuals and organizations they serve to develop solutions to problems and increase trust in police

Organizational Transformation

The alignment of organizational management, structure, personnel, and information systems to support community partnerships and proactive problem solving

Problem Solving

The process of engaging in the proactive and systematic examination of identified problems to develop and evaluate effective responses



Source: *Community Oriented Policing Services*

OUR MISSION

To provide a professional, humane, and safe response to individuals with behavioral health problems and to the homeless.

OUR PURPOSE

To develop and oversee the department's multifaceted strategies for responding to individuals with behavioral health problems and the homeless, and to provide guidance in the areas of policy and procedure.

ACKNOWLEDGEMENT

Special thanks to Senior Police Officer Matt Fowler of the Office of Public Affairs for taking the photographs of the Mental Health Division personnel.

08

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13

26

31

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COMMANDER'S MSG

BOARDING HOMES

TRAINING

HOMELESS OUTREACH

CIRT

CCSI

STATISTICS



MESSAGE FROM THE DIVISION COMMANDER

This past year has been marked with great progress on many fronts. The following are some examples:

- Approval and funding of the pilot Crisis Call Diversion Program
- Start of the formation of the multidisciplinary Senior Justice Assessment Center
- First law enforcement field operations division in the nation to receive International Organization for Standardization certification
- Our specialized response programs for responding to the mentally ill highlighted in two national symposiums: New York City and Washington, D.C.
- Five site visits from personnel across the nation, including representatives from the U. S. Department of Justice
- The Chronic Consumer Stabilization Initiative won the prestigious Michael Shanahan Award for successfully collaborating with The Harris Center for Mental Health and IDD
- The Homeless Outreach Team was a finalist for the IACP 2015 Community Policing Award for demonstrating best practices in partnerships, problem solving, and trust building within our community
- The expansion of the Crisis Intervention Response Team program by two teams
- The development of the publication "Responding to the Mentally Ill: A Guide for Texas Peace Officers" that will be distributed to all Texas police chiefs and to law enforcement personnel, behavioral health professionals, and family members across the state

The Mental Health Division is poised for continued success and innovation in 2016. The keys to our success are the dedicated members of the division and the partnerships we have formed with our community mental health professionals, primarily The Harris Center for Mental Health and IDD. I look forward to another year of providing a professional, humane, and safe response to individuals with behavioral health problems and to the homeless.

Wendy Baimbridge

Wendy Baimbridge, Captain
Mental Health Division

6

The Houston Police Department has a mental health division that oversees six specialized response programs for responding to the mentally ill with one additional program in development.

#1

The Houston Police Department is the leading law enforcement agency in Texas regarding specialized programs for responding to the mentally ill. Houston was selected to train all Texas police chiefs in a state-mandated 16-hour CIT class, has trained law enforcement personnel across the state, and was one of six police departments nationally to be selected as a learning site by the United States Council of State Governments for specialized response programs for the mentally ill.

39

The number of behavioral health professionals from the Harris Center for Mental Health and IDD assigned to the Mental Health Division. The Mental Health Division is a model of community policing (collaborating with the community to proactively address community problems/needs.)

82%

A study by Northwestern University of officer involved shootings in the Houston Police Department found "Officers responding to Critical Incident Training (CIT)-designated situations were 82 percent less likely to use their guns as compared to non-CIT situations." (Executive Summary) (Note: Critical Incident Training refers to Crisis Intervention Training)

Source: Mathematical Methods in the Social Sciences, Houston Texas Police Department Project on Officer-Involved Shooting by Anthony L. Colucci, John Patrick McCleary, and Yan Jie Ng. June 4, 2014.



Police Officers Chris Schuster (left) and Vincent Johnson of the Boarding Homes Enforcement Detail.

BOARDING HOMES ENFORCEMENT DETAIL

The Boarding Homes Enforcement Detail was implemented in 2013 after a successful three-year effort to pass the city's first-ever city ordinance regulating boarding homes. Police Officers Chris Schuster and Vincent Johnson were given a list of over 800 addresses to eliminate, confirm, and/or inspect as boarding homes. A three-phase strategy was implemented to accomplish this: identifying the boarding homes, site visits, and educating the boarding homes of the new city ordinance.

According to the City of Houston Code of Ordinances, boarding homes have three or more elderly or disabled individuals living in them. With the Boarding Homes Enforcement Detail, citizens now have a point of contact for reporting unsatisfactory living conditions. Many of the residents of boarding homes are unhappy with the living conditions but are hesitant to speak up for fear of retaliation from the boarding home owner. Many residents accept the conditions because they have no other options.

2015 Statistics

Number of reported boarding homes in Houston	618
Number of boarding homes registered	124
Site visits	444
Inspections	298
Citations issued	571
Warnings issued	222

Addressing a Need for Training

Officers Schuster and Johnson identified the need to provide boarding home owners and their staffs with training on mental disorders, de-escalation techniques, the Texas Mental Health Code, and the City of Houston boarding home registration process. They developed a four-hour curriculum and provided the first class/seminar on October 22, 2015. The class was well attended with 30 persons present. The class was also well received with many of those attending stating that they thought every owner and every staff member should attend the training. Most stated they wished the class was longer and asked for a follow-up class in the near future. The following are a few written comments provided on the class evaluations.

"This training was most helpful to me. It really helps to identify triggers that cause problems and helps with recognizing what needs to be done in certain situations."

"It's great for the City of Houston to have and provide insight information to better assist individuals that suffer from mental illness to ensure that they (the residents) can have a better place to reside."

"I feel a great relationship between the police and boarding home owners."

"This training was really good, can we have this training quarterly?"

The Spectrum of Boarding Home Conditions



1 in 5

Americans are
affected by mental
illness in a given year

National Alliance on Mental illness



TRAINING

2015 was a very productive year for the training unit. Police Officer Rebecca Skillern and Senior Police Officer Frank Webb (pictured above) are the mental health division's trainers. They provided crisis intervention training (CIT) to all department personnel and to criminal justice and behavioral health personnel across the nation through the United States Council of State Governments' Learning Site Program. Additionally, Officers Skillern and Webb gave community presentations, coordinated the department's CIT Officer of the Quarter awards program, published a quarterly divisional newsletter, published the department's annual report, and maintained the department's Mental Health Division website.

"Upon the subject of education, not presuming to dictate any plan or system respecting it, I can only say that I view it as the most important subject which we as a people may be engaged in."

- Abraham Lincoln

LEARNING SITE VISITS - 2015



Arlington, Texas Police Department

(left to right) Senior Officer Frank Webb, Houston Police Department (HPD) Officer Rebecca Skillern, HPD; Stephanie Gillespie, Community Support Manager, Arlington Police Department; Captain Wendy Baimbridge, HPD.



Duluth, Minnesota Police Department

(left to right) Officer Rebecca Skillern, Houston Police Department (HPD); Lieutenant Cheryl Southwell, HPD; Senior Officer Frank Webb, HPD; Officer Angela Robertson, Duluth Police Department (DPD); Executive Assistant Chief Michael A. Dirden, HPD; Patty Beech, Data Analyst, DPD; Officer Dave Drozdowski, DPD; Deb Holman, Street Outreach, Churches United Ministry, Duluth; Mark Engebretson, Street Outreach, Churches United Ministry, Duluth.

LEARNING SITE VISITS - 2015



Milwaukee, Wisconsin Police Department

(left to right) Lieutenant Cheryl Southwell, Houston Police Department (HPD); Officer Rebecca Skillern, HPD; Chief of Police Charles A. McClelland, Jr., HPD; Lieutenant Liam Looney, Milwaukee Police Department; Senior Officer Frank Webb, HPD.



Madison, Wisconsin Police Department

(left to right) Lieutenant Cheryl Southwell, Houston Police Department (HPD); Gerald Murphy, United States Council of State Governments (USCSG); Nicola Smith-Kea, USCSG; Captain Kristen Roman, Madison Police Department; Executive Assistant Chief Michael A. Dirden, HPD; Sarah Hendrickson, Journey Mental Health Center, Madison; Theresa Badnarik, Journey Mental Health Center; Senior Officer Frank Webb, HPD; Captain Wendy Baimbridge, HPD.

LEARNING SITE VISITS - 2015



U. S. Department of Justice

(left to right) Officer Rebeca Skillern, Houston Police Department (HPD); Captain Wendy Baimbridge, HPD; Kisha Lorio, The Harris Center for Mental Health and IDD (Harris Center); Ann MacLeod, Harris Center; Sergeant J. C. Silva, HPD; Lieutenant Cheryl Southwell, HPD; Joseph Spadafore, Center for Court Innovations, U. S. Department of Justice; Jennifer Tallon, Ph.D., Center for Court Innovation, U.S. Department of Justice; Senior Officer Frank Webb, HPD; Kim Kornmayer, Harris Center.

Only 41%

of adults in the U.S.
with a mental health
condition received
mental health services
in the past year

National Alliance on Mental illness

COUNCIL OF STATE GOVERNMENTS TRAINING - 2015



Apache Junction, Arizona Police Department



Kyle, Texas Police Department - Group One

COUNCIL OF STATE GOVERNMENTS TRAINING - 2015

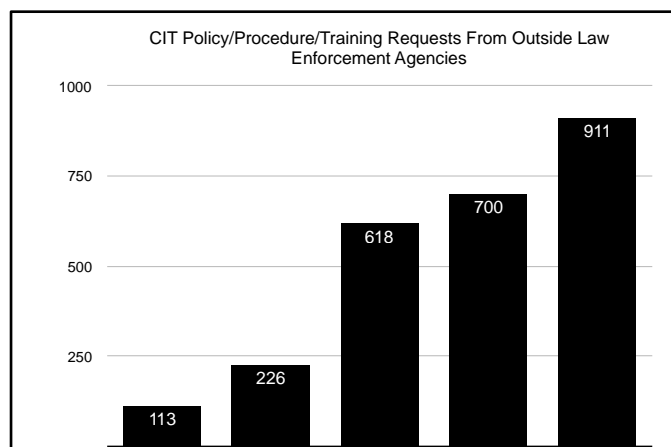
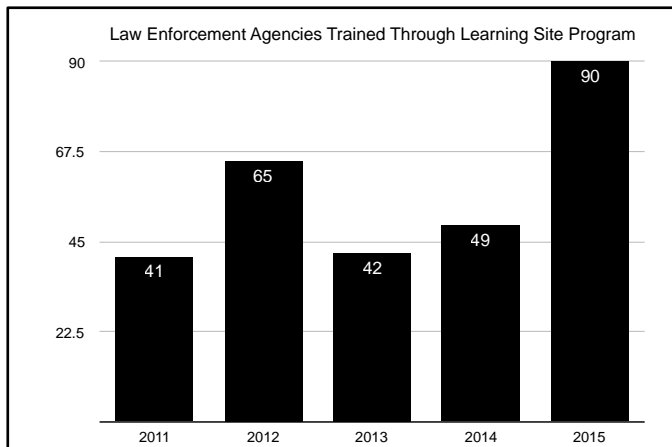
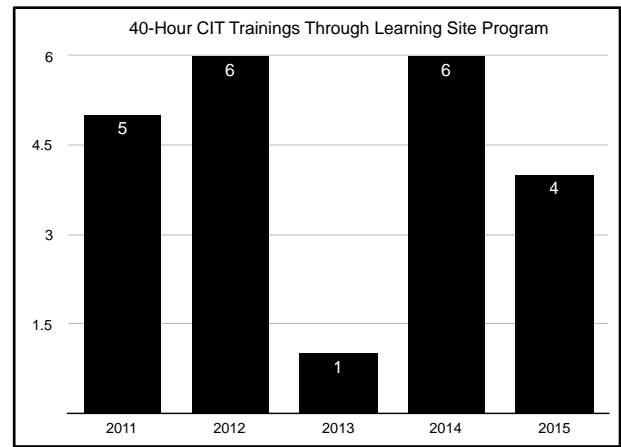
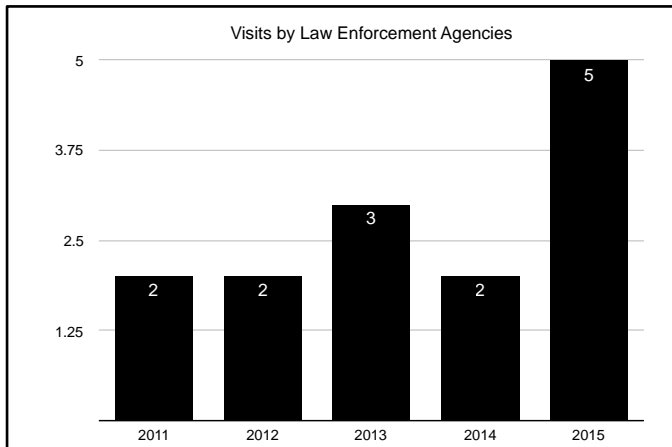


Kyle, Texas Police Department - Group Two



Brownsville, Texas Police Department

LEARNING SITE STATISTICS 2015



TEXAS CIT CONFERENCE

South Padre Island / April 30-May 2, 2015



▲ Ann MacLeod, LPC-S, NCC

(left to right) Officer Rebecca Skillern, President of the Texas CIT Association, presents the Behavioral Health Professional Award to Ann MacLeod. Ann is the program director of Houston's CIRT clinicians.



▲ Homeless Outreach Team

(left to right standing) Senior Officer Jaime Giraldo and Sergeant Steve Wick of Houston's Homeless Outreach Team taught a class on their program. Teaching with them, but not shown, was Case Manager Cami West-Puentes.



▲ Award of Excellence

(left to right) Chief of Police Randy Smith of the South Padre Island Police Department, Senior Officer Frank Webb, and Officer Rebecca Skillern, President of the Texas CIT Association. Officer Webb received the award for his work helping develop Houston's CIT Program.

Dr. Lucy Puryear ►

Dr. Puryear was the Opening Keynote Speaker. She is Associate Professor of Obstetrics and Gynecology at the Menninger Department of Psychiatry and is the Medical Director of the Woman's Place Center for Reproductive Psychiatry. She is also the co-director of the Menopause Center at Texas Children's Pavillion for Women.



Depression

is the leading cause of
disability worldwide

National Alliance on Mental illness

CIT OFFICER OF THE QUARTER

◀ Police Officer George Smith



Ms. Alice Brink, President, NAMI Greater Houston, presents Police Officer George Smith with the CIT Officer of the Quarter Award for a call involving a 9-1-1 hang-up. Officer Smith arrived at the residence and knocked on the front door announcing "Houston police." An elderly woman approached the glass door. A large man holding a large knife approached the woman from behind her inside the house. Officer Smith un-holstered his duty weapon and told the man to put the knife down and to back up. The man paused for a second allowing the woman to reach the door and open it for Officer Smith. Officer Smith moved the woman away from the man continuing to tell him to put the knife down. The man then raised the knife above his head with both hands and plunged the knife into his stomach. Officer Smith ran to the man to prevent further injury and managed to handcuff him. Officer Smith called for emergency medical services.

Sergeant Stephen Wick ▶

Sergeant Wick is the supervisor of Houston's Homeless Outreach Team. Sergeant Wick responded to a call involving a woman threatening to jump off a nine-story parking garage in downtown Houston. Using his crisis intervention/de-escalation training, Sergeant Wick was able to talk the woman down from where she was perched and threatening to jump. The woman was safely taken for emergency psychiatric evaluation and treatment.



◀ Senior Police Officer David Walker

(left to right) Senior Police Officer Frank Webb with Senior Police Officer David Walker who received the award for talking a man down from committing suicide. The man was on the top of an eight-story parking garage threatening to jump off. At one point, the man started stabbing himself in the leg and cutting his forearms. Officer Walker successfully talked the man down.

Police Officers Edwin Lopez and Vuong Vu ▶

Police Officer Edwin Lopez (second from left) and Vuong Vu (far right) talked a military veteran down from jumping off of a building under construction. The veteran was taken to the Veterans Administration Hospital for emergency psychiatric evaluation and treatment.



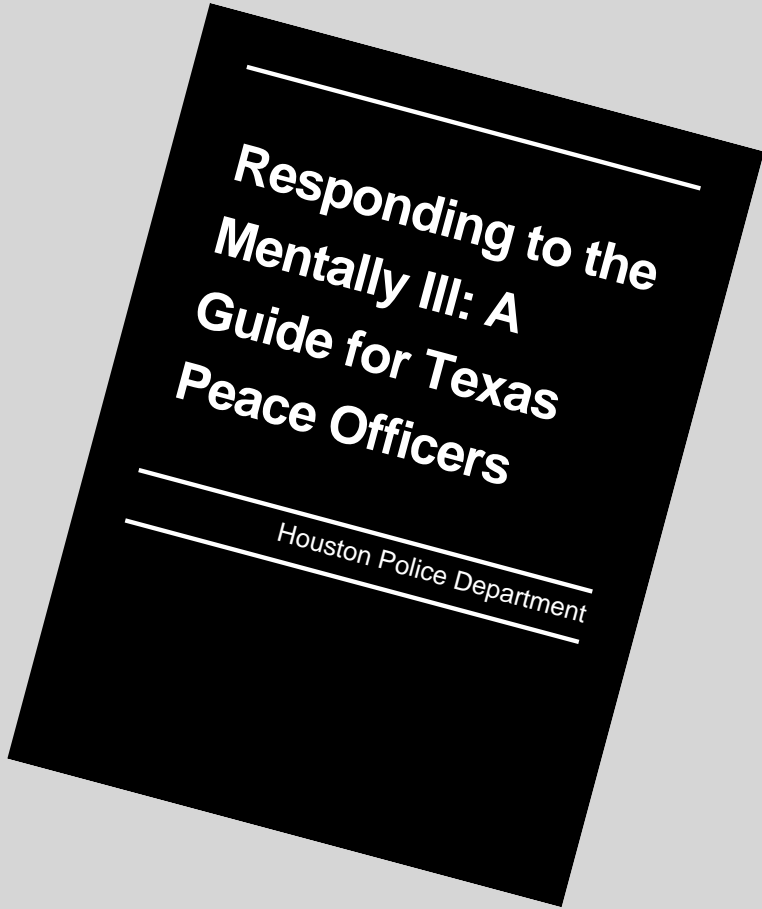
MENTAL HEALTH DIVISION HIGHLIGHTED IN COUNCIL OF STATE GOVERNMENTS SYMPOSIUM IN NEW YORK CITY AND BUREAU OF JUSTICE ASSISTANCE FOCUS GROUP IN WASHINGTON, D.C.



Executive Assistant Chief Michael A. Dirden (head of table) at a United States Bureau of Justice Assistance Focus Group in Washington, D.C. Chief Dirden spoke about Houston's Mental Health Division and the importance of leadership when implementing specialized programs for responding to the mentally ill.



Senior Police Officer Frank Webb (third from left) presented on Houston's specialized programs for responding to the mentally ill at a U.S. Council of State Governments Symposium in New York City.



Responding to the Mentally Ill: A Guide for Texas Peace Officers

Houston Police Department

STATEWIDE TRAINING PUBLICATION

As a learning site, Houston trains law enforcement personnel across the state and nation in crisis intervention techniques and procedures. As Officers Webb and Skillern conduct training across Texas, they are frequently asked questions about the Texas Health and Safety Code. Texas' Code has not been revised since 1985 and thus does not address many of the issues facing Texas peace officers today as they increasingly respond to individuals in serious mental health crises.

In an attempt to help guide Texas peace officers in this area and to help them understand and navigate the Texas Health and Safety Code, the training unit developed a statewide publication titled *Responding to the Mentally Ill: A Guide for Texas Peace Officers*. The following are some of the topics included in the guide:

- emergency detention
- liability
- use of force
- paperwork
- voluntary admission
- juveniles
- seizure of firearms
- transportation
- court-ordered mental health services
- medical clearance
- hospital security
- prohibition of firearms

The guide was distributed to all Texas police chiefs during their annual conference in Austin in March 2016. Additional copies have been distributed to agencies across Texas.



(front row left to right) Police Officer Sheldon Theragood, Senior Police Officer Jaime Giraldo, Case Manager Diedra Kimble-Charles, Case Manager Ashley Mullins. (back row left to right) Case Manager Cami West-Puente, Sergeant Stephen Wick, Senior Police Officer Colin Mansfield, Police Officer Janice Terry.

HOMELESS OUTREACH TEAM

Houston's Homeless Outreach Team (HOT) is a model of community policing. Other police departments have reached out to HOT in order to model HPD's approach to the homeless community and the team regularly receives requests by phone and email for assistance. They continually work with investigators and the District Attorney's Office in an attempt to locate witnesses and/or suspects within the homeless population. Consumer contacts have increased each year from 700 contacts in 2011 to 3,881 contacts in 2015. The team referred 12,899 consumers to other provider agencies in 2015 and obtained temporary and permanent housing for 296 individuals in 2015. In recognition of its accomplishments, HOT was named a finalist for the prestigious International Association of Chiefs of Police (IACP) 2015 Community Policing Award.

2015 Statistics

Consumer contacts	3881
Provider contacts	955
Referrals	12899
Homeless outreach	1684
Emergency detentions	26
People housed	301

Donation of Vehicle

The Homeless Outreach Team (HOT) received their fourth donated vehicle in 2015. It is a new 2015 Ford Transit 10 passenger van. It is solid black and will be left without police markings. The vast majority of individuals HOT interacts with have committed no crime and many are intimidated by the vehicles with police markings, thinking they are going to be arrested. This unmarked van will alleviate that fear.

The vehicle was donated by the Frees Foundation and will be used to transport homeless consumers to available resources with the ultimate goal of getting them off the streets and into housing.

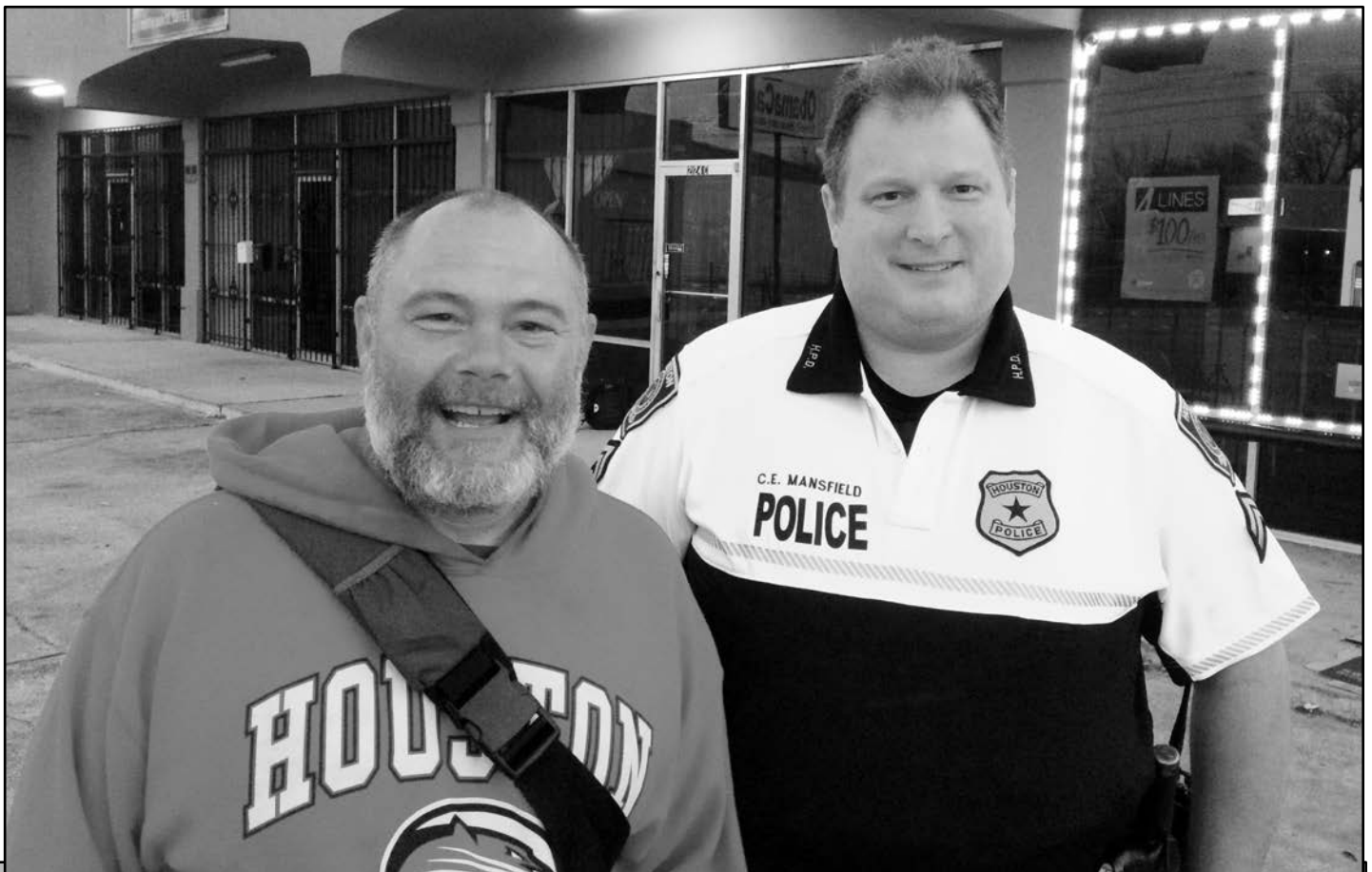


FINALIST FOR IACP 2015 COMMUNITY POLICING AWARD



(above left to right) Senior Police Officer Colin Mansfield; Case Manager Cami West-Puentes; Police Officer Janice Terry; Case Manager Deirdre Kimbel-Charles; Officer Sherman Theragood; Case Manager Ashley Mullins; Sergeant Stephen Wick; Senior Police Officer Jaime Giraldo.

HOT has become the face of the Houston Police Department for many people who live on the streets.



Caring for the Uncared

Senior Police Officer Colin Mansfield, of the Homeless Outreach Team, met Mr. Matthew Campbell at the Houston Center for Sobriety. Mr. Campbell appeared to be in need of mental health services as he was not able to think clearly and became agitated when asked simple questions. Officer Mansfield arranged to have Mr. Campbell transported to the NeuroPsychiatric Center for mental health evaluation and treatment.

Several days later, while working outreach in the northside area of Houston, Officer Mansfield was approached by Mr. Campbell who had a smile on his face. Mr. Campbell said he received the mental health services and medication he needed at the NeuroPsychiatric Center and that he was staying at the men's Salvation Army. Additionally, he said he was on his way back to Indiana to return to work for his previous boss who sent him a bus ticket. Mr. Campbell thanked Officer Mansfield and the Homeless Outreach Team for taking the time to help him in his most desperate hour.

"We think sometimes that poverty is only being hungry, naked and homeless. The poverty of being unwanted, unloved and uncared for is the greatest poverty."

- Mother Teresa

Homeless Outreach Team Estimated Savings

(Based on Meta-Analysis of Costs of Homelessness)

Societal cost of a homeless person	\$40,051
Cost of servicing and housing a homeless person	\$25,529
Difference	\$14,522
Individuals housed by HOT in 2015	301
Estimated savings	\$4,371,122

Culhane, Dennis, Stephen Metraux, and Trevor R. Hadley. 2002. "The Impact of Supportive Housing for Homeless People with Severe Mental Illness on the Utilization of the Public Health, Corrections, and Emergency Shelter Systems: The New York-New York Initiative" Housing Policy Debate 13.1 (2002): 107-163.

Hirsch, Eric, and Irene Glasser. 2007. Rhode Island's housing first program first year evaluation. Providence, RI: Providence College.

Mondello, Melanie, Gass, Ann, McLaughlin, Thomas, and Nancy Short. 2007. Cost of homelessness: Cost analysis of permanent supportive housing, State of Maine-Greater Portland. Portland, ME: Corporation for Supportive Housing, Maine Housing, and Maine Department of Health and Human Services.

Moore, Thomas. 2006. Estimated cost savings following enrollment in the Community Engagement Program: Findings from a pilot study of homeless dually diagnosed adults. Portland: Central City Concern.

Perlman, Jennifer, and John Parvensky. 2006. Denver housing first collaborative cost benefit analysis and program outcomes report. Denver, CO: Denver's Road Home.

United Way of Greater Los Angeles, 2009. Homeless cost study. Los Angeles, CA: United Way.

Half
of all lifetime cases of
mental illness begin by age
14

75%
begin by age 24

National Alliance on Mental illness



CRISIS INTERVENTION RESPONSE TEAM

Houston's Crisis Intervention Response Team (CIRT) started as a six-month pilot program with three teams in March 2008. After a very successful pilot, the program was made permanent later that year. There are 12 teams today.

CIRT is Houston's co-responder program partnering a Houston CIT officer with a masters-level licensed professional clinician from the Harris Center for Mental Health and IDD. The officer and clinician attend roll-call together and ride together in a patrol car. CIRT is our highest level response to individuals in serious mental health crisis. The following are the objectives of CIRT:

- Assist officers with CIT calls
- Conduct pro-active and follow-up CIT investigations
- Respond to SWAT calls as a resource when available
- Handle the most serious CIT calls

In 2015, CIRT handled approximately 17% of all mental health related calls for service and approximately 31% of all emergency detention orders filed by the Houston Police Department.

2015 Statistics

Calls for Service	5340
On-view Investigations	752
Emergency Detentions	1732
Offense Reports/Supplements	2338
Jail Assessments	85
Referral Follow-ups	211
Swat Scenes	23



(above left to right) Senior Police Officer Mark Stevens and clinician partner Dr. Chris Estes.

College Student Threatening Suicide

Senior Police Officer Mark Stevens and his clinician partner Dr. Chris Estes of the Crisis Intervention Response Team were dispatched to a suicide in progress call. The call involved an 18-year-old college student who was standing on the fifth floor balcony of his mother's apartment threatening to jump off. The student had been addicted to PCP, bath salts, kush, and cocaine but was "clean" for one year. He had anger issues, felt he couldn't control himself, lost a video game bet, felt he couldn't take it anymore and wanted to kill himself. He had three previous suicide attempts where he overdosed on drugs.

Officer Stevens and Dr. Estes talked with the student for approximately 15 minutes and were able to establish a rapport with him. They assured him they cared and were there to help him. They were able to safely talk him off of the balcony without injury or force. Stevens and Estes transported the student to the NeuroPsychiatric Center for emergency psychiatric evaluation.

"The student had been addicted to PCP, bath salts, kush, and cocaine but was "clean" for one year. He had anger issues, felt he couldn't control himself, lost a video game bet, felt he couldn't take it anymore and wanted to kill himself."



(above left to right) Chief of Police Charles A. McClelland, Jr. (now retired), CIRT Clinician Pedra Ane, and CIRT Officer Kathryn Vogelsang

CIRT Officer Kathryn Vogelsang and Clinician Partner Pedra Ane Receive Life Saving and Public Service Awards

Police Officer Kathryn Vogelsang and her clinician partner Pedra Ane received life saving and public service awards for responding to a suicidal consumer. It is common procedure to check individuals for criminal warrants. Officer Vogelsang checked the consumer and found he had three (one felony and two misdemeanors) out of Nebraska. The originating jurisdiction confirmed the warrants and requested extradition of the individual. Officer Vogelsang requested the assistance of a patrol unit to help with this process.

During the booking process, the consumer stated he had a heart condition and did not feel well. He stated he forgot to take his heart medication and began deteriorating quickly. An ambulance was called. Officer

Vogelsang laid the consumer on the floor and attempted to keep him calm. Clinician Ane located a defibrillator and, along with one of the assisting patrol officers, placed the defibrillator pads on the consumer as he went into cardiac arrest. The defibrillator read the consumer's heart condition and determined an electric shock was required. The device delivered one shock which resuscitated the consumer for only a short while when he went unconscious again. The device indicated chest compressions were needed. Officer Vogelsang immediately started compressions. The ambulance arrived a short time later and took the consumer to the hospital where he survived the cardiac event.



CHRONIC CONSUMER STABILIZATION INITIATIVE

The Chronic Consumer Stabilization Initiative (CCSI) is Houston's proactive program designed to keep the most chronic consumers out of crisis. In 2014, the program expanded from 50 consumers on the program to 67 and from four case managers to six. A Violent Consumer Initiative (VCI) was implemented for those consumers who had one or more violent episodes involving the police or who had made attempts or threats to carry out a mass shooting or who planned to harm another person.

As with criminal activity, a small percentage of individuals with mental illness account for the majority of police calls for service. These are the individuals who continually go into serious mental health crisis requiring repeated police intervention. Rather than continuing this reactionary cycle, CCSI attempts to break the cycle and keep the person out of crisis by addressing the causal factors of these crises.

Case managers from The Harris Center for Mental Health and IDD access outpatient mental health treatment, housing, primary health care, substance abuse treatment, social security benefits, and address other issues/needs of the consumers assigned to them. The case managers work closely with the NeuroPsychiatric Center, Mobile Crisis Outreach Team, Crisis Stabilization Unit, Crisis Residential Unit, the Harris Center Helpline, the Harris Health System, and the Houston Police Department.

The program won the prestigious International Association of Chiefs of Police (IACP) Community Policing Award in 2010, was a Finalist for the Herman Goldstein Award for Excellence in Problem-Oriented Policing in 2010 and received the IACP Michael Shanahan Award in 2015 for outstanding achievement in the development and implementation of public/private cooperation in public safety.

Jerry

Jerry, 57 years old, has a diagnosis of bipolar disorder with psychotic features and polysubstance dependency. Jerry has a history of noncompliance with psychiatric treatment and has had several admissions to inpatient facilities in Harris County.

The Chronic Consumer Stabilization Initiative (CCSI) started working with Jerry in August 2014 after more than 10 emergency detentions within the previous 12 months and countless law enforcement interactions, including several Crisis Intervention Response Team (CIRT) interventions. When off his medications, Jerry's symptoms include hyper sexuality, psychosis, and verbal and physical threats toward others.

Jerry's last admission to the NeuroPsychiatric Center (NPC) was in January 2015 after the Houston Police Department received a call about Jerry walking into a bank making verbal threats toward others and claiming to have had sexual relations with the female tellers. Jerry was disorganized,

belligerent, rambling, agitated, and difficult to engage. Jerry threatened to shoot one of the responding officers.

He was transported to the NPC for evaluation. It was determined he was in need of higher level care and was transferred to the Harris County Psychiatric Center. Once discharged, CCSI continued making two to three home visits every week encouraging Jerry to stay on his medications while continuing to take him to his psychiatric appointments.

Today, Jerry is stable on his medications and compliant with all his treatment and he is working toward getting his driver's license, making improvements on his home that deteriorated over the years, and working on his relationships with his brother who resides with him. Jerry has not been in the hospital in over a year and has had no interaction with the Houston Police Department during this time. CCSI continues to work with Jerry.

CCSI Client Success Rates 2015

Activity	Pre CCSI 1 Year	Post CCSI 1 Year	Difference
NPC* Detentions	156	40	74%
HCPC** Bed Days	25	12	52%
HPD Incidents	449	53	88%

* NeuroPsychiatric Center

** Harris County Psychiatric Center

CCSI Client Cost Savings 2015

Activity	Pre CCSI 1 Year	Cost	Post CCSI 18-24 Months	Cost	Difference
NPC Admissions	156	\$132,600*	10	\$11,180	\$121,420
HCPC Admissions	25	\$89,775**	3	\$10,773	\$79,002
HPD Incidents	449	\$75,432***	28	\$4,704	\$70,728
TOTAL SAVINGS					\$271,150

* Based on a cost of \$860.00 per day

** Based on a cost of \$513.00 per day

*** Based on a cost of \$168.00 per incident/interaction



STATISTICS

