

MOBILE OUTREACH SAFETY TEAM (MOST)



HISTORY AND BACKGROUND

- In October of 2009, the Mobile Outreach Safety Team (MOST) was created in response to the Reno Police Department's need to more effectively intervene with people in crisis who are living with a severe mental illness. Mental health resources were funded by the state Legislature and currently grant funded by the State to WCHSA.
- MOST can be called to any part of Washoe County to assess a person's mental health status and needs. To keep the person out of the criminal justice system, MOST can assist with directing and/or transporting people in crisis to the most appropriate resources to immediately address their needs.

STRUCTURE



Washoe County MOST is comprised of one licensed Mental Health Counselor Supervisor, four licensed Mental Health Counselors II and one Case Manager III. MOST members are employees of the Washoe County Human Services Agency and are embedded with law enforcement the majority of the time, in order to accomplish the goals of the team. Currently, there is only one MOST member for each shift. The Case Manager provides important follow-up, referral and outreach activities which are highlighted in the following sections.



GOALS

Early and voluntary intervention to avoid costly emergency room visits and hospitalization

Reduce law enforcement calls for service and diversion from jail when appropriate

Connect individuals in crisis to local resources to provide them with a long-term support network

Public safety

OBJECTIVES

- MOST clinicians ride along with law enforcement officers from the Reno Police Department and Sparks Police Department to provide crisis intervention services.
- MOST evaluates individuals who may be experiencing a mental health crisis and refers them to the appropriate resources and community agencies.
- The MOST Case Manager conducts follow-up visits in person or via phone to encourage clients to connect with available resources and assist with any difficulties.

REFERRALS

A referral to MOST may be made in any situation where a mentally ill individual comes into contact with law enforcement or there is concern about their welfare

- Calls to dispatch by suicidal/homicidal subject and/or family members;
- Repeat calls to dispatch regarding non-emergent content;
- Referrals regarding “persons of concern” i.e. exhibiting psychotic or odd behaviors;
- Referrals regarding individuals in continual crisis who are over-utilizing emergency services and hospital emergency rooms;
- Discharges from hospitals and treatment facilities perceived to be risky or unsafe;
- Patients leaving hospitals or treatment facilities against medical advice (AMA) who are perceived to be at-risk;
- Transferring individuals into the community from jail who are considered to need connection to resources in the community and haven’t received mental health services in the jail; and,
- Continuing inappropriate contact with individuals, family members, advocates, or community

Referral Sources

- ▶ **Law Enforcement:** Officers and non-sworn staff may make referrals from day, swing, and graveyard shifts as they identify persons with behavioral health issues including extreme substance use concerns that impact a person's mental health.
- ▶ **Community Providers:** MOST referrals are accepted from public and private community providers when they believe a follow-up contact by MOST will be beneficial to persons with behavioral health concerns.
- ▶ **Family:** Family members may contact MOST when they have a concern about behaviors or actions and believe contact with the MOST team will be beneficial.
- ▶ **Self-Referral:** Individuals may self-refer if they are in crisis, feel as they are at-risk of crisis, or are unable to access community resources due to physical and/or mental difficulties.

OUTREACH AND HOMELESS SERVICES

Community
Outreach

Build For
Zero

HOPE Team

9

**ADDITIONAL
SERVICES**

BIKE TEAM

CINT

TRAINING

COMMUNITY COURT

COMMUNITY EVENTS



When To Call

- **EMERGENCY 911**
- **Threat to themselves or others, attempted suicide, physically violent**
- **Non-Emergency Dispatch-** concern for behaviors, made vague statements about suicide or threats to others
- **Whether you call 911 or non-emergency dispatch, you can request a MOST worker**
- **REMEMBER- THERE IS ONLY ONE MOST WORKER ON AT A TIME FOR THE ENTIRE COUNTY. OFFICERS OFTEN REMAIN ON A “WAIT LIST” WHEN THEY REQUEST A MOST CLINICIAN.**
- **E-Mail- MOST@washoecounty.us**



MOST DATA

- Currently refining on clinical system: AVATAR
- Adding elements to include outreach numbers, shift numbers, etc.
- Data collected daily to include confidential case notes; reported monthly
- COVID Response – Numbers reflect
- Refining data to reflect **qualitative** impact

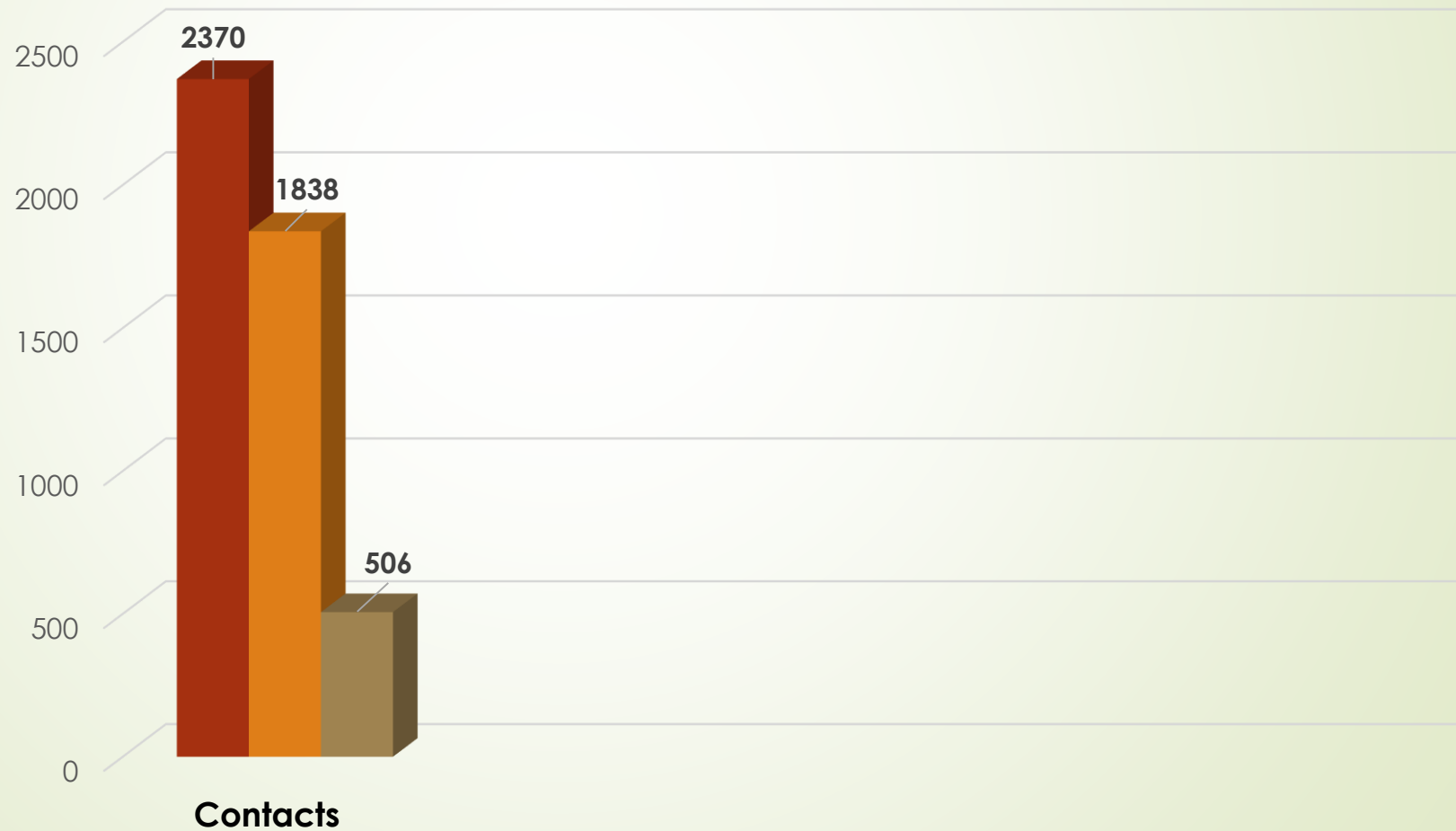
Data

2019: 7/1/18-6/30/19

2020: 7/1/19-6/30/20

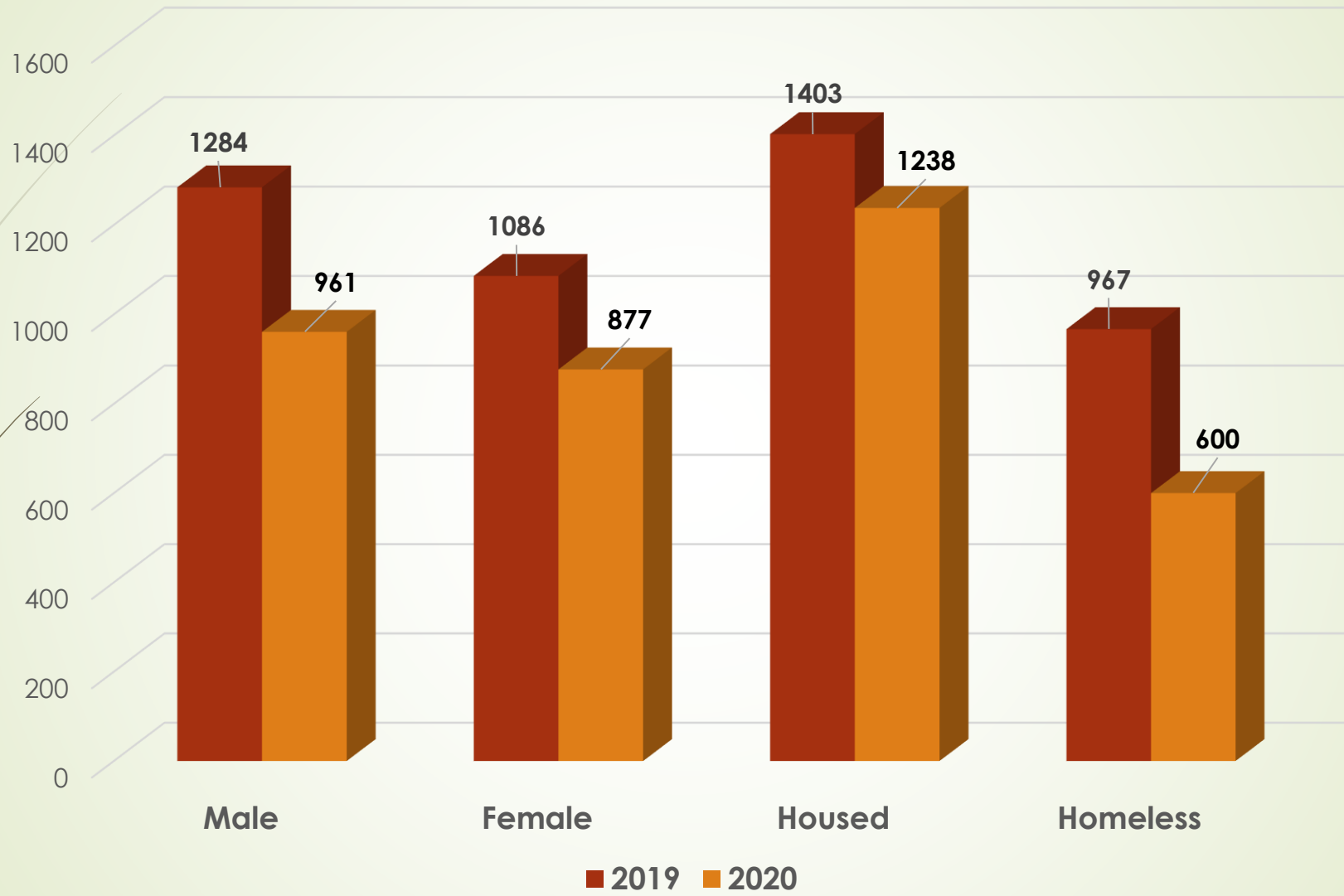
2021: 7/1/20-9/30/20

TOTAL CONTACTS WITH LAW ENFORCEMENT



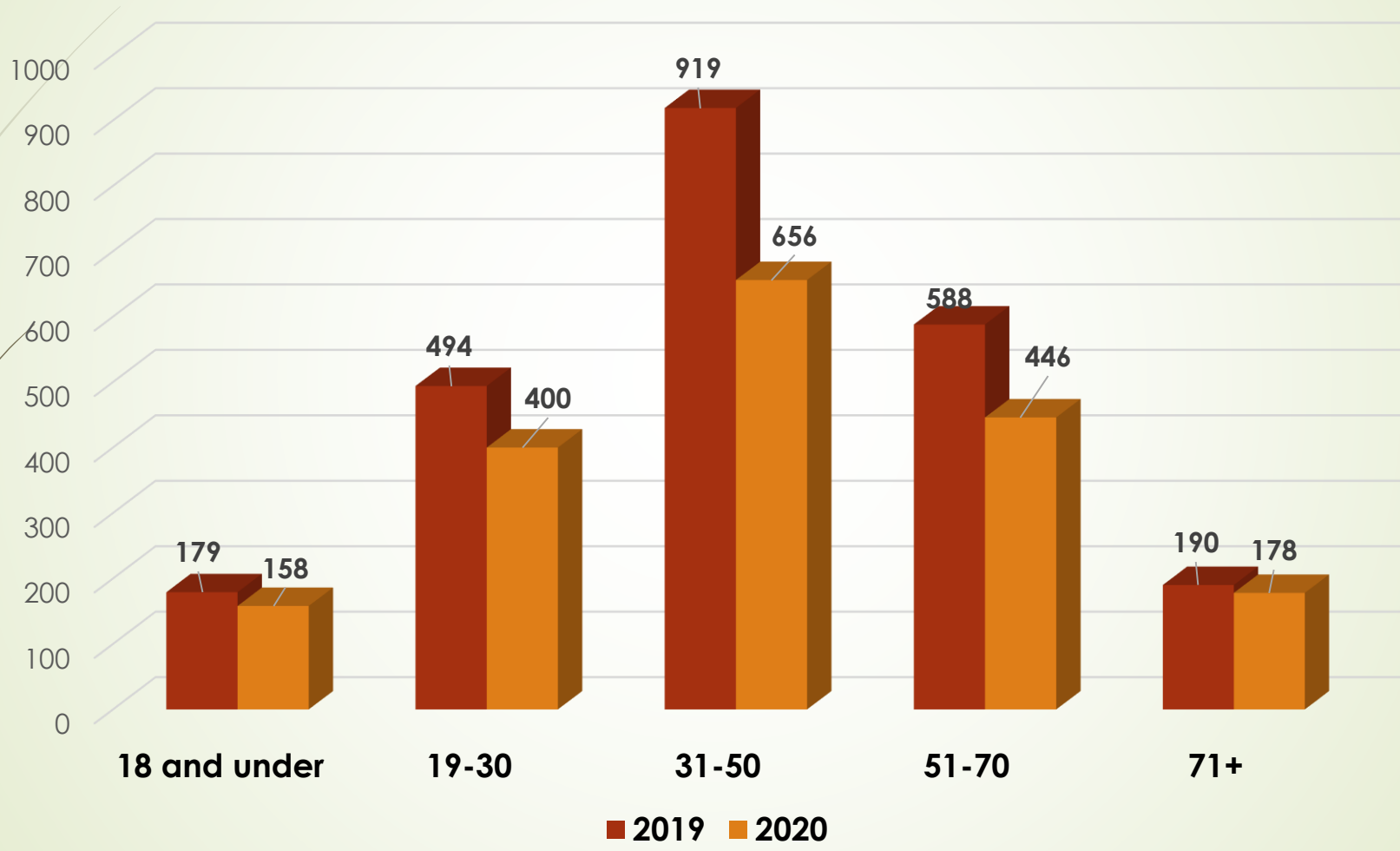
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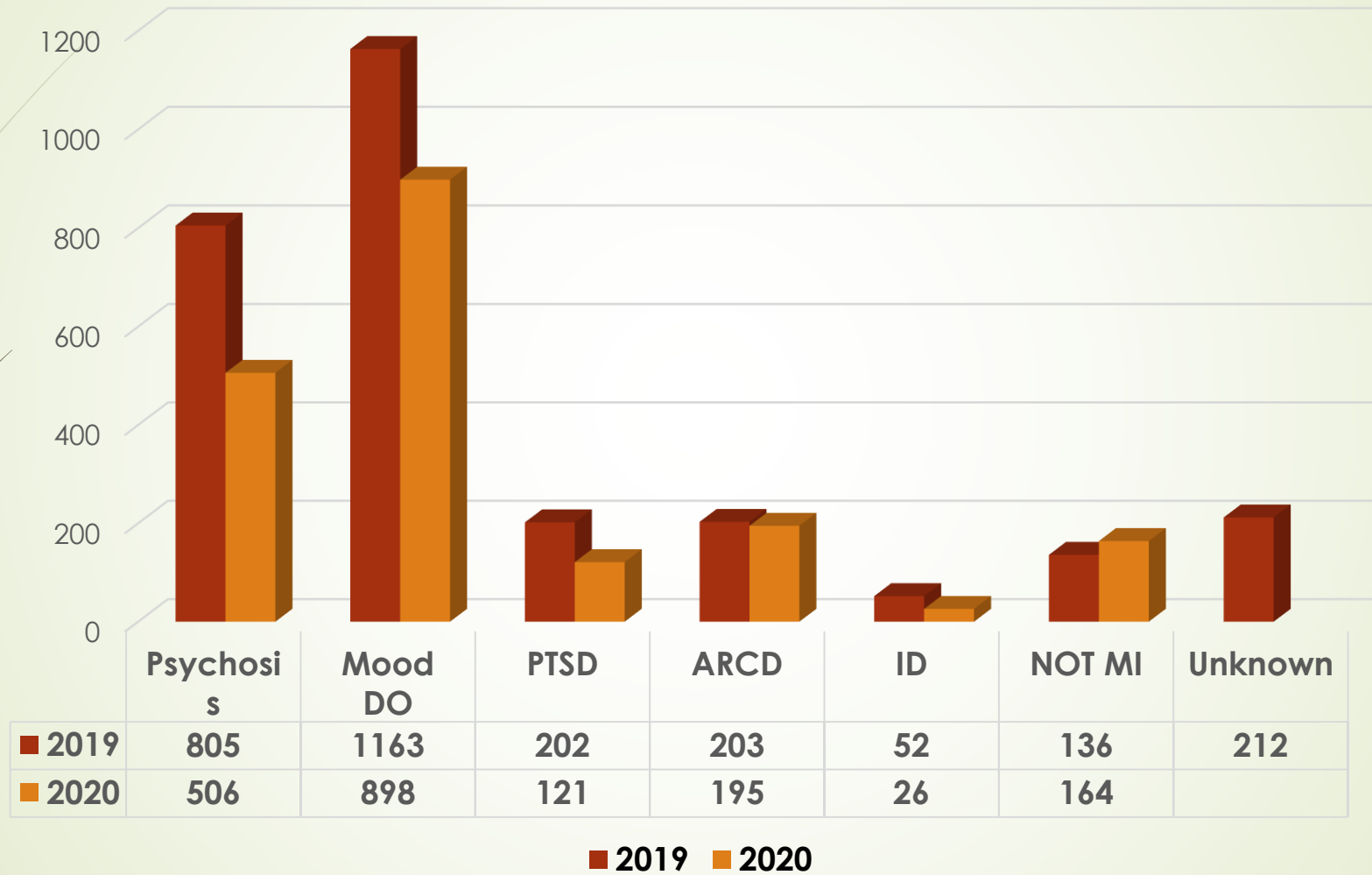


Age

AGE

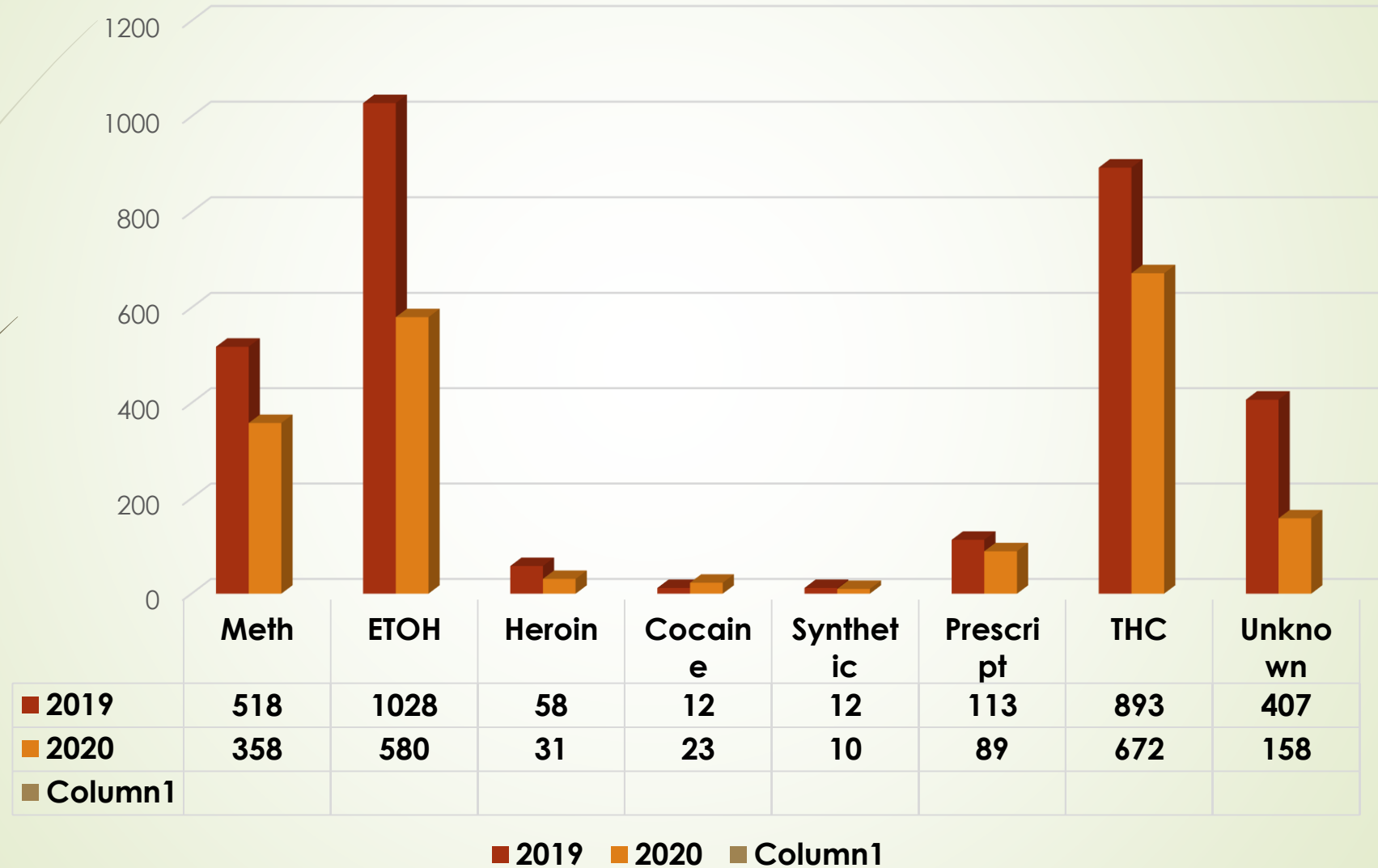


Observed/Self Reported Dx



Substance

SUBSTANCE



QUESTIONS?