Stepping Up: Effective Law Enforcement and Diversion Strategies
Stepping Up: A National Initiative to Reduce the Number of People with Mental Illnesses in Jails
Webinar Recording and Evaluation Survey

• This webinar is being recorded and will be made available online to view later
  – Recording will also be available at www.naco.org/webinars

• After the webinar, you will receive a notice asking you to complete a webinar evaluation survey. Thank you in advance for completing the webinar evaluation survey. Your feedback is important to us.
Tips for viewing this webinar:

• The questions box and buttons are on the right side of the webinar window.

• This box can collapse so that you can better view the presentation. To unhide the box, click the arrows on the top left corner of the panel.

• If you are having technical difficulties, please send us a message via the questions box on your right. Our organizer will reply to you privately and help resolve the issue.
Poll Questions
The Problem:

www.stepuptogether.org
Stepping Up Steering Committee
Get Started

www.stepuptogether.org/what-you-can-do
Accessing Resources: Online Toolkit

- Webinars
- Self-Assessment Tools
- Research
- Planning Exercises
- County Examples
### Stepping Up Webinar Schedule

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<thead>
<tr>
<th>Date</th>
<th>Topic</th>
<th>Archived</th>
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<tr>
<td>May 14, 2015</td>
<td>Getting Started with Stepping Up</td>
<td>Archived</td>
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<tr>
<td>May 14, 2015</td>
<td>Strategies to Measure Prevalence and Assess the Needs of Individuals with Mental Illnesses in Jails</td>
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<td>September 10, 2015</td>
<td>Effective Law Enforcement and Diversion Strategies</td>
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<td>Effective Strategies for Connecting People with Mental Illnesses to Services after Release from Jail</td>
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<td>Preparing a Plan and Tracking Progress</td>
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Module 3: Examine treatment and service capacity and identify policy and resource barriers to minimizing individuals’ contact with the justice system and providing needed treatment and supports

Webinars:
- Examining Treatment and Service Capacity and Identifying State and Local Policy and Funding Barriers (August 20)
- Effective Law Enforcement and Diversion Strategies (September 10)
- Effective Strategies for Connecting People with Mental Illnesses to Services after Release from Jail (October 8)

Resources:
- Module 3 Planning Guide
- Self-Assessment Tools
- Key Resources

[www.stepuptogether.org](http://www.stepuptogether.org)
Today’s Webinar

WEBINAR
Stepping Up: Effective Law Enforcement and Diversion Strategies

Sep. 10, 2015, 2:00 pm – 3:15 pm
Contact: Nestassia Walsh
   (202) 942-4289
   nwalsh@naco.org

REGISTER

Join us for the next webinar in the Stepping Up series to learn about key law enforcement and diversion strategies for reducing the number of people with mental illnesses in jails. As the second of three webinars focused on Module 3 of Stepping Up, county law enforcement and behavioral health practitioners will share law enforcement-focused policies, practices and programs they have established and the impact they have had on these numbers. Attendees are encouraged to first review the first webinar in this module before watching this one. The final webinar in this module will focus on effective strategies for connecting people to community-based services after their release from jails.
Speaker: Dr. Amy Watson

Amy C Watson, PhD
Associate Professor
Jane Addams College of Social Work
University of Illinois at Chicago
Pre-bookings Diversion

Amy C Watson, PhD

Criminal Justice System

DIVERSION

Mental Health Services

RECOVERY

HOPE

INCLUSION

EMPOWERMENT

DESISTANCE

SUPPORT
Overview

• Nature of Problem
• Models of Pre-booking Diversion
• Evidence to date
• Key Components
The Problem

- Over 1.1 million people with mental illnesses arrested in the US each year (Lyons & Walsh, 2010)

- Persons with serious mental illnesses are over-represented in US jails and prisons (~17%) (Council of State Governments, 2002)
  - 72% of these individuals have co-morbid substance use problems

- LA County and Cook County Jails operated the two largest psychiatric facilities in the country

- Persons with SMI tend to spend more time incarcerated pre-trial, serve more of their sentences, and have parole revoked for technical violations more often.
Pre-booking Diversion: Diversion occurs PRIOR to arrest

Elements of pre-booking diversion models

(Deane et al., 1999)

- Mental health training
- Centralized diversion location for psychiatric assessment
- Officer discretion to determine necessity of arrest
Models of Pre-booking diversion

- Police-based specialized response: CIT

- Co-Responder Teams - law enforcement and mental health clinicians

All ideally within the context of larger system wide collaboration
The CIT Model

CIT Core Elements

- Police-based specialized police response
  - Specialized Training for volunteers (15-20% patrol)
  - Single point of entry to emergency psychiatric services
  - Partnerships with community providers
  - Changes in policies and procedures

“CIT – It’s more than just training” - Major Sam Cochran

- Estimate approximately 3000 CIT programs worldwide (most in US)
- Local, multi-jurisdictional and statewide efforts
- Some challenges applying model in different size cities, rural areas
Evidence on CIT Effectiveness

- CIT training improves officer knowledge, attitudes, and decreases endorsement of force as effective response.

- CIT may reduce use of force.

- CIT can reduce arrests and increase transports for psychiatric assessments and other linkages to mental health services.

- The effectiveness of CIT for impacting CJ and MH outcomes longer term is likely dependent on the availability of quality community mental health services and collaboration across systems.
Co-responder models

• Police/Clinician mobile teams for immediate crisis response

• Police/Clinician follow-up linkage teams

• Example Portland, Oregon Behavioral Health Response Teams
Evidence from SAMHSA Diversion Study

• Evidence that pre-booking diversion programs can reduce arrests and jail days without increasing public safety risk

• Diversion programs link people to community mental health services

(Broner et al, 2004; Steadman & Naples, 2005)
Essential Components

• **Collaboration, Collaboration, and more Collaboration**

• Something to divert **TO**

• Now hearing talk about diversion from jail **AND** the ED
Amy C Watson, PhD
acwatson@gmail.com
312 996-0039

THANK YOU!


Speaker: Scott Russell

Captain Scott Russell
Broward County Sheriff’s Office
Broward County, Florida
Crisis Intervention

Broward Sheriff’s Office

Presented by the Department of Law Enforcement

Rev. 9/15
Overview

- Law Enforcement and Social Services
- Developing Partnerships
- Policy
- Training CIT deputies
- Networking
Law Enforcement and Social Services

- Law Enforcement and Social Services have had an adversarial relationship.
- Mistrust and a lack of caring have been a stereotype of law enforcement.
- Law enforcement’s lack of training has permeated a level of response that can generally be deescalated when educated about other, perhaps better, approaches.
Developing Partnerships

In order to be successful in law enforcement, partnerships must be formed with social services.

- BSO has woven itself into the fabric of social services within our community.
- Partnerships materialize the unknown to the known in terms of responsibilities.
- Shares the success with the partnerships and maintains a common goal of helping individuals in crisis.
- Provides an incentive to reduce costs across the social services, courts, jails, and law enforcement.
Partnerships

- The Mentally Ill
- Advocates for the Mentally Ill
- Hospitals and Mental Health Facilities
- Social Services / Human Services
- Corrections / Jails
- Law Enforcement
- Courts / Prosecutors / Defense Attorneys
- Partnerships with Homeless Social Services (70% of Chronic Individuals Experiencing Homelessness have a behavioral health condition).
- Mobile Crisis Teams - Henderson Behavioral Health
Policy

Crisis Intervention Team – In order for change to occur, it must be codified from the Chief Executive.

A clear CIT policy must exist in order to hold deputies accountable in acceptable national practices.

*People or employees learn to expect what you inspect.*
Crisis Intervention Team (CIT) Training

- Law enforcement officers should complete a prescribed 40-hour CIT training session of the Memphis Model.
- While law enforcement officers are not social workers, the familiarization of local social services System of Care provides the best referral outcomes.
- Provided with training, law enforcement officers are better equipped to deescalate potentially dangerous situations with someone experiencing a crisis.
Networking

- Learn about your System of Care in your community and those who are involved in it.
- Connect with Human Services in your counties and offer to be a partner.
- Attend social service meetings on behavioral health - sit on their boards or become a member.
- Learn the process of mental health dollars in your state and how and where mental health dollars are spent in your community.
Thank You!
Poll Questions
Speaker: Neal Cash

Neal Cash
CEO/President
Community Partnerships of Southern Arizona
Tucson, Arizona
The Friendly Front Door:
An Effective, Community-Based
Crisis Service System

Neal Cash
President and Chief Executive Officer

National Association of Counties
“Stepping Up: Effective Law Enforcement And Diversion Strategies”
Webinar September 10, 2015
Neal Cash

• 35 years of experience in behavioral health in southern Arizona
• President and CEO of Community Partnership of Southern Arizona (CPSA) and Community Partners, Inc. (CPI)
• Member of the National Leadership Forum on Behavioral Health/Criminal Justice Services of the National GAINS Center
• Tenured board member of the National Council for Community Behavioral Healthcare
CPI and its subsidiaries offer a full array of behavioral and administrative management services for individuals, families, service providers and other social service organizations.

- Twenty years of experience managing a regional behavioral health system in Pima County, Arizona.
Community Partners, Inc. (CPI) (continued)

- Responsible for managing multiple funding streams and monitoring systems and for ensuring quality of care.
- Transformed the crisis-care system to provide high-quality, accessible and coordinated services.
Community Partners, Inc. (CPI) (continued)

- Developed a comprehensive system of crisis care for approximately 1 million people living in Tucson and Pima County, Arizona.
- Committed to enacting change through collaboration, community reinvestment, public-education campaigns and community trainings.
Building the Crisis Response Center (CRC)
### Crisis System Timeline

<table>
<thead>
<tr>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
</tr>
</thead>
</table>

Crisis System Timeline

2005

- Economy booming
- Tucson growing
- Economic development
- More businesses being developed
- Lack of mental health infrastructure
Crisis System Timeline

2005

- Gaps in mental health crisis system
- Issues around inadequate funding
- Dramatic increase in the use of crystal meth/polydrug use
- Higher activity and greater complexity of cases
- Greater awareness of the intersection of mental illness/substance abuse and the justice system.
"... the effects of Aaron Swyers' paranoid schizophrenia grew stronger and more terrifying as Wednesday wore on, leading to a tragic accident that claimed his life and the lives of Pima County Sheriff's Deputy Timothy Graham and taxi driver Dawud Isa Abusida."

- Arizona Daily Star, 8/13/2005
Bond Election - May 2006

- How could we focus attention on creating a psychiatric urgent care center?
- Developing better infrastructure for crisis services
- Creating better strategies managing community risks
Convening a Process Improvement Initiative

Importance of cross-system collaboration between criminal justice and behavioral health

Implementing philosophical/mindset change in both behavioral health & criminal justice

Developing a criminal justice team

Cross-training the overall behavioral health workforce
Key System Partners

- Community-based service providers
- Hospital Emergency Rooms
- Law Enforcement (police and jail)
- Courts
- Fire Departments
- Primary Care and Health Plans
- Social services, including homeless resources
- Schools
- Child-serving agencies (DCS, etc.)
- Military and Veterans Administration
- Consumers and families
Crisis System Assessment

- Interview the stakeholders
- Interview the community
- Pull crisis system data
- Conduct a literature review on crisis systems
- Perform site surveys within the behavioral health system and the crisis system
“The Commitment”

- Decompress hospital Emergency Departments
- Safe and quick ‘drop off’ for law enforcement (diversion from jail)
- Alternative to juvenile detention
- Quick crisis mediation and return to community with service plan
Critical Components of a Crisis System

• 24-hour crisis telephone line (call and command center)
• Warmlines (pre- and post-crisis intervention)
• Community mobile response
• Walk-in crisis services (urgent care)
• Crisis stabilization (23-hour stabilization)
• Short term sub-acute (few days)
• Transportation
• Peer support and advocacy services
• Transition back into communities
Overarching Goals

- Improve outcomes for CPSA members and their families
- Improve public safety
- Save taxpayer dollars
Crisis System Timeline

2006

- Ballot initiatives and bonds
- Funding for Psychiatric Urgent Care Facilities
- Funding for Psychiatric Inpatient Hospital Facilities
- Competing initiatives (Regional Transportation Authority concerns with sharing a ballot initiative with behavioral health)
- Board of Supervisors approval
Crisis System Timeline

2006

• Both bonds passed
• Steering committee formed
• Outreach to community partners
Crisis Response Center (CRC)

- Operates 24/7/365
- Adult 23-Hour Observation Chairs
- Juvenile 23-Hour Observation Chairs
- Adult Sub-acute wing
- Law enforcement sallyport
- Call Center Line is housed here
Crisis System and CIT

- Recovery starts at the crisis scene with the CIT officer
- Police transport is a vital first step
- Officers must:
  - Be reassuring
  - Reduce trauma
  - De-escalate the crisis
Outcomes- Law Enforcement Transfers

4,433 Law Enforcement transfers in FY 2014 saved more than 8,800 hours of law enforcement time or 4 Law Enforcement Officers. This savings grew to more than 9,000 hours saved or 4.5 Law Enforcement Officers in FY2015.
### Outcomes – Law Enforcement

#### Average Drop-Off Time

LE time spent with custody transfer:

<table>
<thead>
<tr>
<th>Drop-off Time (Minutes)</th>
<th>Population</th>
<th>FY 2014</th>
<th>FY 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Totals for Year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adults</td>
<td></td>
<td>11.5</td>
<td>10.67</td>
</tr>
<tr>
<td>Children and Youth</td>
<td></td>
<td>31.17</td>
<td>23.83</td>
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Outcomes – Jail and Youth Detention Diversion

Of the 7,665 adults dropped-off by law enforcement in FY2014 and 2015, approximately 2,529 were diverted from jail, equaling a savings of $2,934,162 in jail costs.
Outcomes – Jail and Youth Detention Diversion (continued)

During the same period approximately 465 youth were diverted from detention at a savings of $5,135,666 in detention costs. Total 2 year Cost Savings = $8,069,828
Outcomes – Emergency Department (ED) Diversion

In FY14, 529 adults were transferred from the ED to the CRC, thus diverting from an ED visit. This resulted in savings of $219,159 in ED costs.

In FY15, 1,101 adults and youth were transferred from the ED, saving $456,133 in ED costs.
Essential Elements for Creating an Effective, Community-Based Crisis Service System

• Shared Values
• Political Will
• Culture of Collaboration
• Leadership
• Community Inclusion
• Accountability
Poll Questions
Questions?

Type your question into the questions box.
Next Steps: Go to www.StepUpTogether.org

• Check out the Stepping Up website and sign on!

• Review the Stepping Up sample resolution!

• Register for the next webinar on October 8 at 2pm EDT!
Next Webinar: October 8

Stepping Up: Effective Strategies for Connecting People with Mental Illnesses to Services after Release from Jail

Thursday, October 8, 2015
2:00pm EDT - 3:15pm EDT
Register at www.naco.org/webinars
Contact Information

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www.stepuptogether.org