MENTAL HEALTH AND CRIMINAL JUSTICE

CASE STUDY: Mecklenburg County, N.C.

METROPOLITAN CHARLOTTE POPULATION: 1,012,539*

JAIL BED CAPACITY:

AVERAGE DAILY JAIL POPULATION:

BACKGROUND

The Mecklenburg County Jail is one of the largest mental health providers in the county and the state. Each day, at least 12 people with a history of mental illness are booked into the jail. Despite a decrease in jail bookings since 2010, the number of positive screens for a history of mental illness increased from four percent of all bookings in 2010 to 12 percent in 2014. The jail's medical provider conducted 1,127 new patient visits for psychiatry in 2014 and 1,135 follow-up psychiatry visits. While incarcerated, people with mental illnesses often display significantly negative reactions and trauma responses to being jailed.

In 2005, a committee was convened to look at the jail crowding problem in Mecklenburg County. Leaders had started to see an increase in their jail population and were considering building another jail when the sheriff, public defender, district attorney, police chief and Provided Services Organization came together to discuss other options and solutions. Over the course of 18 months, this committee worked with community partners to develop a flow chart, conduct point-in-time surveys and create a plan for reducing the number of people with mental illnesses in their jail by creating a continuum of diversion programs and practices.

JAIL DIVERSION CONTINUUM

Jail Diversion Clinician at Jail Central

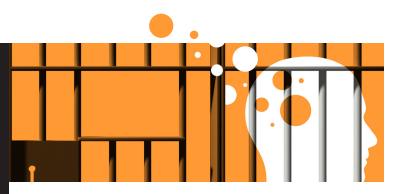
Mental Health and Drug Treatment Courts

Clinician at Public Defender's Office

MeckFUSE

Crisis Intervention Teams

Mobile Crisis



Mecklenburg County has seen a dramatic reduction in its jail population, partially due to these efforts, but leaders understand there are more opportunities. The original committee continues to meet quarterly to discuss solutions to new and continuing challenges with this population. Future work may include a crisis stabilization center to better meet the needs of people with acute mental health treatment needs who do not require hospitalization or trips to the emergency room.

CRISIS INTERVENTION TEAM

The <u>Charlotte-Mecklenburg Crisis Intervention Team</u> (CIT) began in 2008 and has trained more than 800 law enforcement officers from every municipality in the county, as well as the Sheriff's Department and Veteran's Administration security officers. The CIT program begins with a 40-hour law enforcement training focused on increased knowledge and de-escalation skill building, with the ultimate goal of diverting appropriate individuals to treatment and preventing harm to all parties involved. The program has an intentional focus on trauma-informed treatment and the involvement of peers and family members at each step of the program planning, facilitation and evaluation.

The CIT program works by identifying individuals in mental health crises through calls for service regarding suicide, active mental health crisis, substance abuse crisis and developmental disabilities. CIT-trained officers are dispatched to respond to the scene for assistance. Officers assess the situation and use de-escalation and other skills to determine the best course of action. As the CIT program is a community-based collaboration between law enforcement and mental health agencies, the next step is to connect individuals with appropriate services in coordination with the National Alliance on Mental Illness (NAMI) Charlotte and other local service providers.



MECKFUSE

In 2012, the jail diversion committee turned its attention to researching effective supportive housing models for people with mental illnesses that would reduce recidivism and costs, and discovered the Corporation for Supportive Housing's (CSH) Frequent User Systems Engagement, or FUSE, model. The committee engaged local housing organizations to participate in the planning effort for the initiative, including the Men's Shelter of Charlotte and the Salvation Army Center of Hope.

To develop the program, Mecklenburg County hired CSH to consult on the planning process. The resulting Mecklenburg County FUSE initiative (MeckFUSE) is an interagency effort providing 45 new units of supportive housing to individuals that cycle between the criminal justice system and homeless shelters in the county. It is a housing program for homeless men and women with health issues who have been frequent users of Mecklenburg's jail, street camps, shelters and hospitals.

MECKFUSE PARTICIPANTS

- More than half of MeckFUSE participants have spent time in a jail or prison and most have spent years – if not decades – homeless prior to joining.
- More than half of MeckFUSE participants are on medication for a mental illness.

To identify MeckFUSE tenants, a data match between the local Homeless Management Information System and the county jail identifies individuals who are repeatedly cycling between shelters and jail. The contracted service provider, <u>Urban Ministry Center</u> (UMC), uses the list to perform in-reach to the jail and local shelters, as well as to those living on the street. Potential participants are assessed for behavioral health conditions, a requirement for eligibility. Once eligible, tenants are quickly housed in one of a number of units UMC has worked with local landlords to secure. Tenants receive voluntary wraparound support services. All housing and services are paid for through county

diversion funds at a cost of about \$900,000 per year. Since it began operating, the program has placed 57 clients in housing. Mecklenburg County has become a model of effective use of the FUSE Blueprint as a framework for program planning and implementation, and received the CSH Project of the Year award in 2014.

PRELIMINARY OUTCOMES

The University of North Carolina at Charlotte has been contracted to evaluate MeckFUSE over a three-year period. Preliminary findings have shown that:

- MeckFUSE has been able to retain 88 percent of clients over an 18-month period
- Clients report better health ratings, increased access to services and fewer self-reported arrests/jail stays than the year prior to their participation
- MeckFUSE has been able to reduce cost burden to health care systems: the average annual bill pre-MeckFUSE was \$4,358 (median: \$1,600) compared to the average bill after entry into MeckFUSE at \$1,261 (median: \$819)
- The average number of hospital visits for MeckFUSE participants fell from 10 per year to two.

Mecklenburg County provided three years of funding for MeckFUSE through its general fund for a total cost of about \$3,000,000. A small portion of this money went to CSH for technical assistance and to UNC-Charlotte for evaluation. The majority of the funding goes directly to UMC for services and rental subsidies. MeckFUSE leadership anticipates continued funding for the program after the three-year period, pending continued positive results.

RESOURCES

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*Mecklenburg County, North Carolina. U.S. Census Bureau. Available at: http://quickfacts.census.gov/qfd/states/37/37119.html. Accessed June 19, 2015.