FY19 Category 2: Learning Community-1st Session Strategic Planning

Justice and Mental Health Collaboration Program (JMHCP)

February 19, 2020
Speakers

I. Laura Fabius, Policy Analyst, Law Enforcement, Behavioral Health, The Council of State Governments Justice Center

II. David A. D’Amora, M.S., LPC, CFC, Senior Advisor, The Council of State Governments Justice Center

III. Jessica Murphy, LMSW, Co-Responder Team Leader, Johnson County Mental Health Center
Presentation Outline

I. Overview

II. The Basics of Strategic Planning: Toward Data-Driven Decisions

III. The Johnson County Mental Health Co-Responder Program

IV. Q&A
Session Objectives

The session will help participants to:

1. Understand the importance of:
   - Articulating *why* your organization exist and *where* it is going
   - Determining *how* your organization will fulfill its mission and achieve the envisioned goals
   - Determining *next* steps to be undertaken

2. Become aware of planning tools and resources that currently exist

3. Appreciate the link between stakeholder engagement, data collection and analysis, and program effectiveness and funding sustainability.
POLL

Please select which of the following strategic planning components and activities are a part of your grant or have already been done in your jurisdiction. *Please select all that apply.*

a) Establish an **Interagency Planning Committee.**

b) Facilitate a Sequential Intercept Mapping or other **needs/gaps analysis.**

c) Review of **policies, procedures, and protocols.**

d) Visit a jurisdiction that has already implemented a PMHC for a **peer-to-peer learning experience.**
FY19 Category 2 Grantees

- Phoenix Police Department, AZ
- Division of Criminal Justice, CO
- Warren County, KY
- Boston Police Department, MA
- City of Muskegon, MI
- City of Saint Louis Metropolitan Police Department, MO
- Clemson University, SC
- City of Lubbock, TX
Alice: Which way should I go?

Cheshire Cat: That depends on where you are going.

Alice: I don’t know where I am going.

Cheshire Cat: Then it doesn’t matter which way you go.

*Through the Looking-Glass*

Lewis Carroll
The Plan

In the beginning was the plan
And then came the assumptions
And the assumptions were without form
And the plan was without substance
And darkness was upon the face of the workers
Strategic Planning

A method to devise and employ plans or strategies toward a goal.

Strategic Plans allow for:

• Informed, timely decision-making through data-driven decisions

• Clear direction about what the organization will and will not do

• Increased staff empowerment and clear boundaries through increased communication
Strategic Planning

Is not

- Forecasting
- Simply applying quantitative measurement to organizational planning
- Does not eliminate risk

It is

- Concerned with making decisions today that will affect the future of the organization
- A way to understand what risks exist in relation to the decisions being made
Simple Strategic Planning

A Step-by-Step Approach to answering three key questions:

- What are you “marketing”?
- Who are your target constituents?
- How can you beat or avoid your competition?
Simple DOES NOT Mean Simplistic

- There are complex issues involved
- It requires gathering, digesting and analyzing a lot of information
- Start big, at a high level and sift through all of the noise
Completing an Organizational Assessment

Powerful tool to identify your organization’s strengths and weaknesses.

Helps you to understand where your organization is at and what it needs to grow (assets, physical plant, deployment, organizational structure, training)

Critical to complete before attempting to institute change
Completing an Organizational Assessment

Involves a critical review (honest critique) of the organization, not simply a series of complaints.

Can be done as a whole in smaller departments, or by units, divisions, specialty areas, or shifts
Completing an Organizational Assessment

Areas to examine can include, but do not have to be limited to:

**Simple**: Review of dispatch/records data to compare yearly trends and look for significant increases/reductions and attempt to determine why that has occurred.

**Comprehensive**: Review training, crimes areas, deployment, investigations, patrol, administrative operations, specialty units.
Start by Studying the Way It Is Now

- Gather basic information and data without making judgements
- Build some assumptions based on the information, *again* without judgement
- This becomes the foundation of all further strategy discussions and decisions, so must be reviewed carefully
How It Works

Planning

• Gather Information
• Assess Capabilities
• Make Assumptions
• Make Strategic Assessments
• Formulate Strategy
• Establish Goals and Objectives
• Formulate Tentative Implementation Plans
• Finalize Implementation Plans

Monitor Developments and Progress

Execution
Funding & Sustainability

- Securing ongoing financial support is one of the most common challenges

Planning
- Program evaluation
- Public relations campaigns
- Stakeholder engagement

Funding

Sustainability
The Secrets of Sustainability

• Stay attuned to shifting trends and work on maintaining your program, as well as improving it
• Involve your entire program/intervention team
• Recommendations:
  ➢ Clearly define your program’s goals and mission
  ➢ Involve key stakeholders and find a champion
  ➢ Build cross-agency collaborations
  ➢ Collect “data” to make the case for sustaining the program over the long-term
  ➢ Market your program
  ➢ Identify potential funding streams
Effective Leadership

• Is leadership committed to long-term involvement with the program?

• Is there support from key stakeholders in the community and among relevant agencies and providers?

• Is there a champion who can publicly advocate for the continuation of the program
Cross-Agency System Collaboration

- Are the relevant treatment and justice agencies involved with collaborating on the program?

- Are there formal interagency agreements in place that can be used as building blocks for maintaining the program?

- Are collaborators adequately involved in program design, implementation, and evaluation?

- Are there opportunities to integrate the program into other key program areas already in place in other agencies?
Demonstrated Outcomes

- What data exist that can be used to assess program effectiveness?
- What other information can be used to support the need for and effectiveness of the program?
- Have the evaluation findings been written up in an easy-to-read format?
- Have outcomes been communicated to stakeholders, collaborators, and potential funders?
Marketing Strategies

• What products are available or could be developed that would help to disseminate information about the program?

• Has the target audience been identified for any marketing efforts?

• Has a marketing plan been developed?
# Planning For Funding Sustainability

## Analyze funding needs
- What are the true costs of the program?
- Which costs are one-time start up vs which are ongoing?
- Consider services/treatment, staff salaries, IT, supplies

## Identify funding sources
- Federal, State, County/City
- Private foundations
- Donations
- Program fees
- Medicaid and other insurance

## Strategize
- What costs are covered by insurance/benefits?
- Which funding sources are restricted? Which are more flexible?
- What funding sources can meet what program costs?
Overall

These supplemental funding strategies do five things:

1. Provide funds for sustainability
2. Provide bridging services between institution and community until Medicaid and other benefits can be obtained
3. Broaden the target population expanding diagnostic or functional categories served
4. Supplement existing community services where there are capacity issues
5. Pay for services not available from Medicaid or other health insurers (e.g., transportation, gap funding for medication)
Johnson County Mental Health Co-Responder Program
KC metro population
2.1 million

Johnson County population
597,555

Johnson County area
477 sq. mi. (303,000 acres)
About Johnson County, KS

- 20 cities
- 17 municipal & county law enforcement agencies
- 1,100 jail beds
- 760 avg. daily jail pop.
- 6 medical centers
- 6 school districts
Johnson County Mental Health Center (JCMHC)

Department of County Government

MHC has $35 Million budget and 335 FTEs
- State and Federal Funds
- Fee for Service
- County Tax Funds

Serves 10,000 individuals annually

Crisis services to 5,500 residents annually
What is a JCMHC Co-Responder?

Licensed clinician
Employee of JCMHC
Stationed @ the Police Department
Wears a uniform
Has police radio, work cell and work vehicle
Access to Electronic Medical Record and Record Management System
Two Co-Responders

Olathe
9a – 5p and 4p – 12a
OP
7a – 3p and 2p – 10p
Lenexa
8a – 4p and 2p – 10p

Single Co-Responder
Shawnee, NE, Leawood/PV & Sheriff

Mon & Tues: 2p – 10p
Wed: 12p – 8p
Thurs & Fri: 9a – 5p
Getting Started...

Formation of the Criminal Justice Advisory Council (CJAC)
- Council is made up of diverse group of community stakeholders and decision makers

2008

United Community Services of Johnson County received a grant from the Health Care Foundation of Greater KC
- Facilitated a Sequential Intercept Mapping Workshop
- Funded a Jail Population Survey

2009

Awarded first Criminal Justice and Mental Health Collaboration Program Grant for Olathe

2010

Awarded a JMHC Expansion Grant for Overland Park

2013

11 Co-Responders funded by cities, a school district and a hospital

2020
# Program Start-Up

<table>
<thead>
<tr>
<th>Task</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop Memorandum of Understanding</td>
<td>Includes budget</td>
</tr>
<tr>
<td>Administer pre-survey to LEO</td>
<td></td>
</tr>
<tr>
<td>Review PD’s mental health policy</td>
<td></td>
</tr>
<tr>
<td>Funding</td>
<td>Primarily by cities</td>
</tr>
<tr>
<td></td>
<td>Hospital donations</td>
</tr>
<tr>
<td></td>
<td>Alcohol tax funds</td>
</tr>
</tbody>
</table>

Primarily by cities, Hospital donations, Alcohol tax funds
Budget

Cities/PD

One-time
• Pants
• Radio
• PD Computer & Printer

Reoccurring
• Salary & Benefits
• Cell phone
• Car

JCMHC

One-time
• Shirts
• JCMHC Computer & Printer

Reoccurring
• Supervision
Recruitment

- Post on JCMHC job site
- Advertise on PD social media
- Joint interviews
- Ride along w/ LEO
- Shift with Co-Responder
- PD background check & polygraph
Determining a Schedule

**Single CR**

“Staggered schedule”
- **Hours**
  - M/T: 2 pm – 10 pm
  - W: 12 pm – 8 pm
  - Th/F: 9 am – 5 pm
- **Benefits**
  - Helps with recruiting
  - Connecting with clients
  - PD culture

**Multiple CR**

- Monday – Friday w/ 1-2 hours of overlap
- Split with weekend coverage
- Rotation days/eves/weekends
Co-Responder Training

First 2 months of employment:
- Required MHC & PD trainings
- Ride along with officers
- Field work with fellow Co-Responders
- Shadowing other JCMHC teams
- Co-Responder mentor
- Checklists for JCMHC teams & PD

Supervisor shadowing when they go “live”
Goals of the Program

- Suicide prevention
- Avoid ER
- Avoid Jail
- Reduce repeat MH calls for service
Co-Responder Responsibilities

- 911 response (secondary responder)
- Review police reports
- Provide outreach by phone or to the home (always with LEO)
- Liaison with JCMHC
- Training for officers

"The right intervention at the right time by the right person."
Co-Responder: Etc.

- Cop Culture training for MHC staff
- Follow-up with LEO about outcome of a call
- Work with municipal courts to help with behavioral health integration
- Present at Citizen’s Academy
- Behavioral health vs. mental health
One suicide every 4 days in Johnson County

Source: KDHE-KIC 2018

Completed Suicide Outreach Protocol

- Informal until June 2019
- Utilized for any completed suicide or suspected suicide
- Can be to any loved one
- Consulted with Suicide Awareness Survivors Support group (SASS Mo-Kan)
Completed Suicide Outreach Protocol

• Formalized outreach to include:
  • A condolence card with a S.O.S. booklet
  • A phone call
  • A door knock with an officer
Northeast Co-Responder

2017 & 2018 – 1 co-responder
  • 7 PD & 10 cities

2019 – 2 co-responders
  • Leawood/Prairie Village
    • 2 PD & 3 cities
  • Northeast 5
    • 5 PDs & 7 cities
Number next to city name is US Census Bureau's 2018 July 1 population estimate.

January 31, 2020
Northeast CR Data

Data is June – Dec of respective years

911 Calls
- 2018: 15
- 2019: 78
- 420% increase

ER Diverts
- 2018: 4
- 2019: 43
- 973% increase

Jail Diverts
- 2018: 1
- 2019: 5
- 400% increase
What’s Going Well...

- Taking CIT one step further
- Better identification of behavioral health calls
- Officer’s engagement & perception of the mental health system
- Increased accountability & problem solving
- Liaising with mental health community
- Training for officers
Learning Opportunities

**Routine meetings**
- supervision
- team meeting
- program meeting

**“Big events”: Team Leader meets on scene or meet after**

**Secondary trauma**
Professional Quality of Life (ProQol) Assessment

**Hourly vs. salary for clinicians**

**Safety**
LEO always present securing scene before CR arrival
March 9 – 11, 2020
Embassy Suites in Olathe, Kansas
Themes: Start Up, Interventions, Funding, Data, etc.

www.jocogov.org/corcon
Data Driven
### Shawnee PD Officer Survey Results

<table>
<thead>
<tr>
<th>Question</th>
<th>Range</th>
<th>Pre-CR</th>
<th>Post-CR</th>
<th>Difference</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preparedness with dealing with individuals with MI</td>
<td>Very well</td>
<td>18%</td>
<td>22%</td>
<td>+4%</td>
<td>+22%</td>
</tr>
<tr>
<td>Self-Confidence to Deal with Mental Health calls</td>
<td>Complete confidence</td>
<td>9%</td>
<td>17%</td>
<td>+8%</td>
<td>+89%</td>
</tr>
<tr>
<td>Other Officer’s Preparedness</td>
<td>Very well</td>
<td>5%</td>
<td>13%</td>
<td>+8%</td>
<td>+160%</td>
</tr>
<tr>
<td>Dept. effectiveness at meeting the needs of people w/ mental health</td>
<td>Very effective</td>
<td>12%</td>
<td>27%</td>
<td>+15%</td>
<td>+125%</td>
</tr>
<tr>
<td>concerns</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dept. effectiveness minimizing time on MI calls</td>
<td>Mod/Very effective</td>
<td>25%</td>
<td>38%</td>
<td>+13%</td>
<td>+52%</td>
</tr>
<tr>
<td>Dept. effectiveness at keeping MI individuals out of jail</td>
<td>Mod/Very effective</td>
<td>8%</td>
<td>23%</td>
<td>+15%</td>
<td>+188%</td>
</tr>
<tr>
<td>How helpful is the mental health system?</td>
<td>Mod/Very helpful</td>
<td>11%</td>
<td>37%</td>
<td>+16%</td>
<td>+163%</td>
</tr>
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</table>

Pre-CR in 2015 = 65  
Post-CR in 2017 = 70
<table>
<thead>
<tr>
<th>Year</th>
<th>2018</th>
</tr>
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<tbody>
<tr>
<td>Contacts</td>
<td>5,179</td>
</tr>
<tr>
<td>911 Response</td>
<td>500</td>
</tr>
<tr>
<td>911 Phone Response</td>
<td>122</td>
</tr>
<tr>
<td>ER Diverts</td>
<td>235</td>
</tr>
<tr>
<td>% ER Diverts</td>
<td>37.8%</td>
</tr>
<tr>
<td>Jail Diverts</td>
<td>79</td>
</tr>
<tr>
<td>% Jail Diverts</td>
<td>12.7%</td>
</tr>
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</table>
### ER Diverts by Hospital

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Diverts</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>SHAWNEE MISSION MEDICAL CENTER</td>
<td>47</td>
<td>51%</td>
</tr>
<tr>
<td>OLATHE MEDICAL CENTER</td>
<td>15</td>
<td>16%</td>
</tr>
<tr>
<td>CHILDREN'S MERCY HOSPITAL KANSAS</td>
<td>10</td>
<td>11%</td>
</tr>
<tr>
<td>OVERLAND PARK REGIONAL</td>
<td>6</td>
<td>7%</td>
</tr>
<tr>
<td>THE UNIVERSITY OF KANSAS HOSPITAL - MARILLAC CAMPUS</td>
<td>5</td>
<td>6%</td>
</tr>
<tr>
<td>COTTONWOOD SPRINGS</td>
<td>4</td>
<td>4%</td>
</tr>
<tr>
<td>MENORAH MEDICAL CENTER</td>
<td>3</td>
<td>3%</td>
</tr>
<tr>
<td>ST. LUKE'S SOUTH</td>
<td>2</td>
<td>2%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>92</strong></td>
<td><strong>100%</strong></td>
</tr>
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Contact information

Presenters

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Next Steps

1. Review Resources.
2. Consider how to improve your jurisdiction’s strategic planning process.
3. If you want to be connected to any of today’s presenters, please contact your TA coach.

Next Session
Practical Tools for Lawful Information Sharing
TBD
Thank You!

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