Enhancing Behavioral Health and Criminal Justice Partnerships Through Cross-Training

September 16, 2020
Agenda

I. Welcome and Introductions

II. Behavioral Health and Criminal Justice Cross-Training and Partnerships: An Overview

III. Harris County, Texas: The Harris Center

IV. FY19 JMHCP Essex County Sheriffs Office, Massachusetts

V. Questions and Answers
Speakers

• Kevin F. Coppinger, *Sheriff, Essex County Sheriff’s Office*
• Ethan Kelly, *Senior Policy Analyst, The Council of State Governments (CSG) Justice Center*
• Dr. Melissa Stein, *Senior Research Associate I, Policy Research Associates Inc*
• Wayne Young, *Chief Executive Officer, The Harris Center*
The Council of State Governments Justice Center

We are a national nonprofit, nonpartisan organization that combines the power of a membership association, representing state officials in all three branches of government, with policy and research expertise to develop strategies that increase public safety and strengthen communities.
How We Work

- We bring people together
- We drive the criminal justice field forward with original research
- We build momentum for policy change
- We provide expert assistance
Our Goals

**Break the cycle of incarceration**
We assist those working inside and outside of government to reduce both crime and incarceration among youth and adults in contact with the justice system.

**Improve health, opportunity, and equity**
We work across systems to develop collaborative approaches to improve behavioral health, expand economic mobility, and advance racial equity for people and communities affected by the justice system.

**Expand what works to improve safety**
We help leaders understand what works to improve public safety and what does not, and assist them to develop strategies, adopt new approaches and align resources accordingly.
The U.S. Department of Justice Bureau of Justice Assistance

Mission: BJA provides leadership and assistance to local criminal justice programs that improve and reinforce the nation’s criminal justice system. BJA’s goals are to reduce and prevent crime, violence, and drug abuse and to improve the way in which the criminal justice system functions. In order to achieve such goals, BJA programs illustrate the coordination and cooperation of local, state, and federal governments. BJA works closely with programs that bolster law enforcement operations, expand drug courts, and provide benefits to safety officers.

Visit the BJA website to learn more.
Justice and Mental Health Collaboration Program

The Justice and Mental Health Collaboration Program (JMHCP) supports cross-system collaboration to improve public safety responses and outcomes for individuals with mental illnesses (MI) or co-occurring mental illness and substance abuse (CMISA) who come into contact with the justice system.
Policy Research Associates

Policy Research Associates, Inc. (PRA) is a women-owned small business that is a national leader in behavioral health and research. The company offers four core services that help people with behavioral health needs achieve recovery. In partnership with our sister non-profit, Policy Research, Inc, we offer technical assistance, training, research, and policy services.
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V. Questions and Answers
The Need for Collaboration

- Different approaches to individuals with mental illnesses and substance use disorders
- Conflicting processes
- Competing priorities
- Limited funding
Benefits of Collaboration

- Community Collaboration
- Services Integration

→

- Service retention
- Stability in the community
- Public safety
Challenges with Collaboration

Limited resources create a competitive and/or protective environment

Funding silos

System cultures

Photo by: Naassom Azevedo on Unsplash
Who to Involve

Professionals + People with Lived Experiences + Family Members and Advocates

Criminal Justice + Mental Health + Substance Use

Social Services + Entitlements + Housing

Veterans Services + Health
Elements of Collaboration

• Commitments
• Shared goals – improving recovery, reducing justice involvement
• Shared language
• Shared programs
• Cross-trainings
• Regular cross-system communication (meetings, reports, etc.)
• Shared data
Enhancing Collaboration

- **Taking Ownership**
  - Task forces
  - Boundary spanners/champions
  - Persons with lived experience
- **Routine meetings and problem solving**
  - Task force meetings
  - Case staffing
  - Community meetings
- **Regular, on-going cross-training**
Enhancing Collaboration

• Interagency agreements
  ▪ Coordination of services
  ▪ Communication expectations
  ▪ Data and information sharing
  ▪ Partnerships org charts
  ▪ Duplication of efforts

• Data sharing
  ▪ Regular reports
  ▪ Dashboards
Cross-Training Benefits and Goals

• Clarify complex behavioral health and criminal justice processes
• Build rapport between criminal justice and behavioral health staff
  - Recognize shared challenges
  - Enhance connection and communication between staff
  - Explore different perspectives
Cross-Training Benefits and Goals

- Develop common definitions and shared language
- Foster mutually beneficial solutions to address community’s specific needs
- Increase efficacy and effectiveness of collaborative programs
Cross-Training Strategies

• Trainings
  ▪ Cross-agency education: Staff from one agency or system train staff in other agencies/systems
    o Orientation
    o Periodically (regular, on-going)
    o Special topics
Cross-Training Strategies

- Members of both systems attend trainings or workshops/conferences together (ex. Crisis Intervention Team trainings, Sequential Intercept Model [SIM] mapping workshops)
  - Cross agency visits/walk-throughs
  - Process mapping meetings/workshops
  - Ride-a-longs or other “shadowing” activities
  - Site visits to evidence-based or promising programs
Process Map Examples

Sequential Intercepts for Change: Criminal Justice/Behavioral Health Partnerships: Charlotte, Mecklenburg County, North Carolina- 2016

# Crisis Stabilization Deep Dive: 2016 Mecklenburg County (Charlotte), NC

<table>
<thead>
<tr>
<th>PRE-CRISIS (PREVENTIVE)</th>
<th>CRISIS, NOT EMERGENCY</th>
<th>EMERGENCY</th>
<th>POST-CRISIS OR EMERGENCY</th>
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<tbody>
<tr>
<td><strong>National Alliance on Mental Illness</strong>&lt;br&gt;Family and consumer education, resource information, and advocacy</td>
<td><strong>Davidson LifeLine</strong>&lt;br&gt;Crisis hotline, training</td>
<td><strong>911 Dispatch</strong>&lt;br&gt;Over 100 Telecommunicators 16-hr Crisis Intervention Team (CIT) Training</td>
<td><strong>National Alliance on Mental Illness</strong>&lt;br&gt;Family and consumer education, resource info, and advocacy&lt;br&gt;Support groups&lt;br&gt;Recommendations for ongoing recovery support</td>
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<td><strong>Monarch Walk-in Clinic</strong>&lt;br&gt;Evaluations, medication management, therapy</td>
<td><strong>National Alliance on Mental Illness</strong>&lt;br&gt;Family/consumer education, resource recommendations, advocacy&lt;br&gt;Family/consumer support thru crisis</td>
<td><strong>Cardinal Innovations Call Center</strong>&lt;br&gt;Crisis referral info 24/7/365</td>
<td><strong>Promise Resource Network Recovery Hub</strong>&lt;br&gt;Peer support transition from inpatient setting</td>
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<td><strong>Anxia Prevention and Recovery Center</strong>&lt;br&gt;Detox Services 24/7/365 Social Detox</td>
<td><strong>Mobile Crisis</strong>&lt;br&gt;24/7/365&lt;br&gt;Assess, triage, refer</td>
<td><strong>MEDIC</strong>&lt;br&gt;24/7/365&lt;br&gt;Assess, triage, transport</td>
<td><strong>Peer Bridge Program</strong>&lt;br&gt;Transition from Hospital and Jail&lt;br&gt;Peer support transition from inpatient setting</td>
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<td><strong>Amara Wellness Walk-in Clinic</strong>&lt;br&gt;Evaluations, medication management, therapy</td>
<td><strong>Monarch Walk-in Clinic</strong>&lt;br&gt;Evaluations, medication management, therapy</td>
<td><strong>Mobile Crisis</strong>&lt;br&gt;24/7/365&lt;br&gt;Assess, triage, refer</td>
<td><strong>HopeWay</strong>&lt;br&gt;Residential treatment&lt;br&gt;Day treatment&lt;br&gt;Two transitional living centers</td>
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<td><strong>Charlotte Mecklenburg Police Department</strong>&lt;br&gt;40-hr Crisis Intervention Team training (CIT)&lt;br&gt;CIT Mental Health Clinician&lt;br&gt;Mental Health First Aid&lt;br&gt;Mecklenburg County Sheriff’s Office&lt;br&gt;40-hr Crisis Intervention Team training</td>
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<td><strong>Urban Ministry</strong>&lt;br&gt;Homeless diversion/Street outreach</td>
<td><strong>Charlotte Community Based Outpatient Clinic</strong>&lt;br&gt;Charlotte Health Care Clinic</td>
<td><strong>Charlotte Mecklenburg Police Department</strong>&lt;br&gt;40-hr Crisis Intervention Team training (CIT)&lt;br&gt;CIT Mental Health Clinician&lt;br&gt;Mental Health First Aid&lt;br&gt;Mecklenburg County Sheriff’s Office&lt;br&gt;40-hr Crisis Intervention Team training</td>
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<td><strong>Anxia Prevention and Recovery Center</strong>&lt;br&gt;Detox Services 24/7/365 Social Detox</td>
<td><strong>Presbyterian Hospital</strong>&lt;br&gt;Acute Care Emergency Department&lt;br&gt;Behavioral health beds Child/adolescents unit</td>
<td><strong>Mecklenburg County Reentry Services</strong>&lt;br&gt;For Formerly Incarcerated Individuals&lt;br&gt;Housing, employment, educational support; refer to mental health/substance abuse provider for appointments</td>
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<td><strong>Charlotte Health Care Clinic</strong>&lt;br&gt;For Veterans Individual, group, family counseling</td>
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<td><strong>Municipal and College Police Departments Probation</strong></td>
<td><strong>Central Regional Hospital Broughton Hospital</strong></td>
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<td><strong>Charlotte Vet Center</strong>&lt;br&gt;Range of social and psychological services</td>
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<td><strong>Recovery Advocacy</strong>&lt;br&gt;Promise Resource Network, Mental Health America, National Alliance on Mental Illness</td>
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Basic Behavioral Health/Criminal Justice Cross-Training Topics

Overview of Mental Illness and Wellness

• Terms and definitions
• Roles and responsibilities of partners/staff
• Signs, symptoms, and behaviors of mental illness
• Substance-related, co-occurring mental health and addictive disorders

Basic Behavioral Health/Criminal Justice Cross-Training Topics

- Stigma
- Trauma-informed responses – Basic
- Suicide intervention and non-suicidal self injury
- Disorders in children – autism and developmental disorders; disruptive, impulse-control, and conduct disorders
- Compassion fatigue/vicarious trauma and employee selfcare

Basic Criminal Justice/Behavioral Health Cross-Training Topics

On Scene Assessment and Response Protocols

• Active listening, nonverbal communication
• Crisis de-escalation, stabilization techniques, and mediation skills
• Officer/clinician/staff/patient safety

Basic Criminal Justice/Behavioral Health Cross-Training Topics

Resolution and Resource Options

• Overview of the criminal justice system
• Community resources and after-hours referrals and resources
• Peer support
• Homelessness and housing alternatives
• Military personnel/veterans’ resources and specific needs
• Involuntary commitment process
• Transportation of people who have mental health disorders, intellectual and developmental disorders (I/DD), and physical disabilities

Advanced Behavioral Health/Criminal Justice Cross-Training Topics

- Assessment, commitment, and legal considerations
- Data collection and demonstrating program success
- Guardianship, power of attorney, and issues of aging
- Information sharing across law enforcement and mental health
- I/DD and neurodevelopmental/neurocognitive disorders – Adults
- Mood, psychotic, and personality disorders

Advanced Criminal Justice/Behavioral Health Cross-Training Topics

- Motivational interviewing
- Post-incident debrief and departmental support
- Procedural justice, fairness, and bias
- Psychopharmacology and medication
- Responses to media and community inquiries/outrage
- Specialty courts and other diversion options
- Stakeholder engagement
- Trauma-informed responses – Advanced

Other Important Cross-Training Components

- Perspectives from people with lived experience and their family members
- Peer-to-peer learning opportunities
Collaboration and Data Sharing

- Sharing agency data (blinded)
- Sharing client data (may include protected health information)

Collaboration and Data Sharing

Recap: Elements of Collaboration

• Commitments
• Shared goals – improving recovery, reducing justice involvement
• Shared language
• Shared programs
• Cross-trainings
• Regular cross-system communication (meetings, reports, etc.)
• Shared data
Other Collaboration Tips

- Consistency is key.
  - “Regular, on-going” is a common theme in collaboration.
- Top-down support is necessary.
- Don’t underestimate the power of building trust across agencies and staff.
- Recognize that building collaboration may take time.
- But, don’t be deterred - keep at it!
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About The Harris Center

The local mental health authority in Harris County, Texas
The Harris Center for Mental Health and Intellectual and Developmental Disabilities (IDD)

**Our Mission:** Transform the lives of people with behavioral health and IDD needs.

**Our Vision:** Empower people with behavioral health and IDD needs to improve their lives through an accessible, integrated and comprehensive recovery-oriented system of care.

**Our Values**

- Collaboration
- Compassion
- Excellence
- Integrity
- Leadership
- Quality
- Responsiveness
- Safety
The Reach of Our Services in FY 2019

- **21.8K** Adult Mental Health
- **5K** Children/Adolescent Mental Health
- **21K** IDD & Autism
- **4K** Forensic Mental Health
- **1.8K** Diverted from Jail
- **17K** Psychiatric Crisis
- **274K+** Prescriptions Filled
- **2.3K+** 911 Crisis Calls Diverted
- **130K** Crisis Line Calls
Map of The Harris Center’s Sites

2350 Employees deliver care at 87 Service locations throughout Harris County
Formal Inter-Agency Training

- Local law enforcement academies
  - Houston Police Department (HPD)
  - Harris County Sheriff’s Office (HCSO)
  - Ft. Bend Sheriff’s Office
  - Webster Police
  - University of Texas (UT) Police Department
  - Precinct 2 Constable’s Police Citizens Academy
- More than 62 law enforcement jurisdictions in Houston/Harris County
Formal Inter-Agency Training

• The Harris Center, HPD, and HCSO offer quarterly training for all staff and law enforcement officers who work in collaborative programs.

• Invited speakers include:
  ▪ Harris Health Administrators
  ▪ Harris County District Attorney’s Office
  ▪ Harris County Public Defender’s Office
  ▪ Harris County Public Health
  ▪ Individuals with lived mental health experience

Photo by: Harris County Police Department
Additional Training Opportunities

- National Alliance on Mental Illness (NAMI)
- Mental Health America
- Homeowners’ association meetings
- Religious organizations
- University classes
- Community health fairs
- Crisis Management presented to other agencies
- FBI-sponsored Joint Terrorism Task Force
Cross Jurisdictional Training

- Houston – Original US Department of Justice and Council of State Governments Justice Center LE-MH Learning Sites
  - Boston Police Department
  - Charlotte-Mecklenburg Police Department, NC
  - Cook County-Chicago
Cross Jurisdictional Training

• Safety and Justice Challenge Learning Visit
• Routine visits from other jurisdictions and technical assistance to:
  ▪ El Paso, TX
  ▪ Santa Fe, TX
  ▪ Denton, TX
Cross Jurisdictional Site Visits

- Jail Diversion
- Outpatient Competency Restoration
- UT-Harris County Psychiatric Center
- Center for Sobriety (a.k.a. Sobering Center)
- Crisis Call Diversion Program located in the Houston Emergency Center
- Education Transition Center
- Ride-a-longs with law enforcement and The Harris Center program members
# Conference Trainings

## Criminal Justice Conferences
- Texas Crisis Intervention Team (CIT) Association
- Houston Bar Association Bench Bar Conference
- Texas Judicial Commission on Mental Health - Summit
- Council of State Governments
- American Corrections Association
- Texas Corrections Association
- CIT International

## Behavioral Health Conferences
- National Suicidology Association
- Supportive Housing Conference
- NAMI National Conference
- National Council for Behavioral Health
- Texas Council of Community Centers
Stronger Together

Sharing Information
-Innovative Ideas
-Effective Policy Changes
-Professional Culture
-Relationship Building
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About The Essex County Sheriff’s Department

FY19 JMHCNP Category 3 Implementation and Expansion Grantee
Essex County Sheriff’s Department, MA

Essex County is located just outside of Boston and encompasses 34 cities and towns. The Department’s top priorities are to ensure public safety for its residents and provide secure and fair treatment of in-custody individuals. We use innovative correctional approaches and evidence-based practices to provide pre and post release rehabilitation, and academic training to people involved in the justice system with emphasis on identifying individuals with mental illnesses or co-occurring disorders.
Essex Mental Health Task Force

- Comprised of key criminal justice system and community partners. Utilizing the [Sequential Intercept Model](#) we identified an opportunity at intake to implement the [Brief Jail Mental Health Screen](#) to flag for potential mental health population.
  - District Attorneys
  - Parole
  - Probation
  - Public Defenders
  - Community Behavioral & Mental Health Partners
  - Work Force Development
Mental Health First Aid Training

- National Council for Behavioral Health and the Missouri Department of Mental Health model
  - Train the Trainer – all 520 ECSD employees trained
  - Renewing certification this year
Crisis Intervention Team (CIT) Training and Implementation

• Department of Justice
• National Institute of Corrections
  o Designed to help officers understand and recognize mental health disorders and how to de-escalate those individuals and avoid use of force
  o Through the Massachusetts Sheriff’s Association 100 sheriff’s department’s staff are trained in CIT yearly
Trauma Informed Care Approach to Corrections

- ECSD looks to train all staff in the Trauma-Informed Care approach
  - Increase understanding of trauma
  - Create an awareness of the impact of trauma on behavior
  - Develop trauma-informed responses for our population
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Thank You!

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The presentation was developed by members of The Council of State Governments Justice Center staff. The statements made reflect the views of the authors, and should not be considered the official position of The Council of State Governments Justice Center, the members of The Council of State Governments, or the funding agency supporting the work.

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