

Justice Center

THE COUNCIL OF STATE GOVERNMENTS

FY21 Connect and Protect: Law Enforcement Behavioral Health Response Program Orientation

Justice and Mental Health Collaboration Program

March 11, 2022





Agenda

- I. Welcome and Introductions
- II. Overview of Bureau of Justice Assistance, The Council of State Governments Justice Center, and Justice and Mental Health Collaboration Program
- III. Overview of Connect and Protect Grant Requirements
- IV. FY21 Connect and Protect Grantee Cohort
- V. Technical Assistance (TA)
- VI. Grantee Experience
- VII. Questions and Answers





Presenters

- Maria Fryer, Justice Systems and Mental Health Policy Advisor, Substance Abuse and Mental Health, Bureau of Justice Assistance, U.S. Department of Justice
- Peggy Heil, Behavorial Health Specialist, Colorado Division of Criminal Justice
- Jenna Savage, *Deputy Director*, *Boston Police Department*
- Deirdra Assey, Senior Policy Analyst, Law Enforcement, CSG Justice Center
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The U.S. Department of Justice Bureau of Justice Assistance

Mission: BJA's mission is to provide leadership and services in grant administration and criminal justice policy development to support state, local, and tribal justice strategies to achieve safer communities. BJA works with communities, governments, and nonprofit organizations to reduce crime, recidivism, and unnecessary confinement, and promote a safe and fair criminal justice system.



Bureau of Justice Assistance U.S. Department of Justice



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





Overview of JMHCP

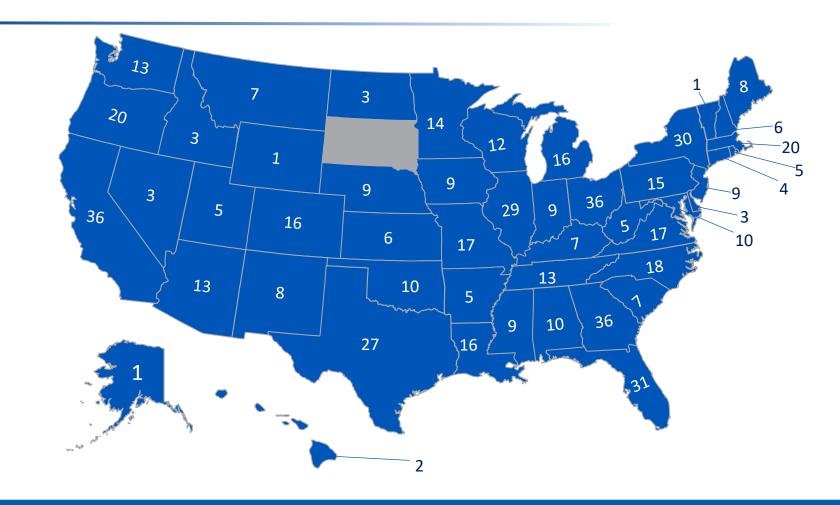
The Justice and Mental Health Collaboration Program (JMHCP)

- JMHCP supports cross-system collaboration to improve public safety responses and outcomes for individuals with mental and behavioral health conditions or co-occurring mental health conditions and substance use disorder who come into contact with the justice system.
- This program supports public safety efforts through partnerships with social services and other organizations that will enhance responses to people with MHD and MHSUD.



Over 600 Awardees across the Nation

- Representing 49 states and two U.S. territories
- \$189.6
 million
 awarded





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Connect and Protect Overview

Designated to support law enforcement-behavioral health cross-system collaboration and to improve public safety responses and outcomes for individuals with mental and behavioral health conditions or co-occurring mental health conditions and substance use disorder who come into contact with the criminal justice system



Connect and Protect Objectives

- Plan and deliver a law enforcement agency response program in coordination with a mental health agency—advocacy and services to improve or enhance the response.
- Pay salaries, as well as other expenses, such as training (overtime) and coordination activities, to design and implement a police-mental health collaboration program (PMHC).
- Conduct an evaluation of the PMHC and community satisfaction.
- Engage citizens through officer outreach and education to improve public safety.



Connect and Protect Objectives (cont.)

- Build positive community relations and trust through public communication strategies.
- Enhance officer knowledge and skills in responding to community members with MHD and MHSUD.
- Increase public safety agency capacity to develop and sustain the program by collecting data to inform practices, stakeholder groups, policy development, and ongoing professional development.





Grant Planning and Implementation

- Through a two-phase process consisting of planning and implementation activities, grantees will develop a coordinated approach to implementing or enhancing a response and/or services for individuals with MHD and MHSUD involved in the system.
- The planning phase is up to 12 months, and the implementation phase will begin once the grantee has met the requirements of the planning phase and will continue for the remainder of the grant.
- Grantees will be required to attend a virtual convening in July 2022.



Budget Planning

- Grantees should structure their budgets to allocate a portion of the budget (up to \$100,000 of the total grant award) to complete Phase 1: Planning within 12 months of receiving final OJP approval of the projected budget.
- Program budget approval occurs after BJA and the CSG Justice Center's technical assistance coach have approved the Planning & Implementation Guide.
- Period of performance duration: Up to 36 months



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FY21 C&P Grantee Focus Areas

Grantee	Grant Focus
Anaheim, CA	Plan, implement, and evaluate the Community Care Response Team (CCRT) project with the Homeless Outreach Team (HOT) Officers.
Boon County, IL	Develop a behavioral health component to the Support Outreach Recovery Team (SORT).
Boston, MA	Hire a full-time master's-level BEST clinician and evaluate the program's effectiveness.
Cape Girardeau County, MO	Develop a co-responder program; training for 911 dispatch; and a peer support for debriefing officers following incidents.
Carrollton, GA	Expand existing Carroll County Crisis Response Team, a co-responding, mobile crisis response unit that is dispatched by Carroll County 911 System.





Grantee	Grant Focus
Chicago, IL	Support collaborative Clinical Support Program in partnership with National Alliance on Mental Illness.
Colorado Department of Public Safety	Create interactive web-based planning and decision-making tool, develop specialized response program registry, interactive map, and eLearning courses for emergency responders.
Conway, AR	Implement 2 co-responder teams that includes a social worker and a law enforcement officer.
Dalton, GA	Plan and implement a co-responder team in partnership with local community service providers.
Durham, NC	Develop and implement the pilot program Crisis Advocate Response and Engagement (CARE) Initiative as part of a crisis call diversion program.





Grantee	Grant Focus
Frederick, MA	Create a Mobile Crisis Team that partners Frederick Police Officers and mental health professionals.
Kalamazoo County, MI	Create a police-mental health collaboration program, which will include hiring a coordinator to manage the coordination of multiple stakeholders.
Los Angeles, CA	The Mental Evaluation Unit will identify high utilizers and use existing programs to address their needs.
Miami, FL	Implement a high utilizer intervention program, pairing a law enforcement officer and a clinical social worker to proactively engage the top 100 frequent utilizers of emergency services.
Multnomah County, OR	Develop the Behavioral Health Connections (BHC) program to increase screening, referral, comprehensive case management, and outreach services across the county.





Grantee	Grant Focus
New Castle County, DE and NAMI DE	Expand CIT trainings to other departments while developing standard CIT policies and procedures for officers and agencies. A needs assessments will be conducted to better understand community perception of mental health and police involvement.
Pasco County, FL	Embed intervention specialists in the call center for early engagement and de-escalation with people experiencing a behavioral health crisis.
Pine Belt, MS	Expand the co-responder team to the Hattiesburg, MS, area and hire a mental health clinician and community support specialist for the mobile crisis response team.
Richmond, VA	Enhance programming to support high utilizers of emergency services by establishing a co-responder team and incorporating peer recovery services into their response.
Rowan University, NJ and the Atlantic County Sheriff's Office, NJ	Develop the Project COPE Response System, form the CRT team with a CIT officer and social worker, and train officers on CRT and CIT.





Grantee	Grant Focus
Shoreline, WA	Provide additional co-responder capacity to the RADAR program as well as a full-time treatment navigator.
Stamford, CT	Expand the local Behavioral Health Unit and hire a second social worker dedicated to juveniles and a part-time social worker to cover evenings and weekends to ensure full-time coverage.
Suffolk County, NY	Develop a 911 diversion response model to increase access to treatment for individuals who have frequent contact with emergency services.
Sumter County, FL	Implement a co-response program to bring together crisis intervention specialists and officers.
Tennessee State and NAMI Cookeville	Implement a Crisis Assistance Helping Out on the Streets (CAHOOTS) modeled pilot program in Cookeville, TN.





Grantee	Grant Focus
West Orange, NJ	Expand their local co-responder program and bring together West Orange Police Department and Mental Health Association of Essex and Morris.
Tropical, TX	Enhance the local Mental Health-Law Enforcement Co-Responder Team Program.
Tucson, AZ	Launch Community Assessment Response and Engagement (CARE) team, which will be made up of a clinician who will serve as the program manager and two case navigators/peers.



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TA Coach

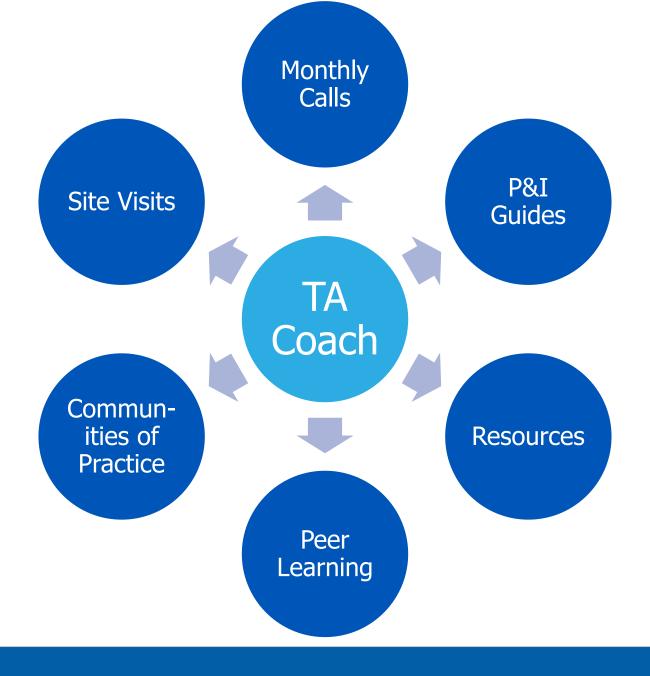
Peer Learning

JMHCP TTA

Access to Experts

Resources & Tools









Planning & Implementation (P&I) Guide

- 1. Goals
- 2. Collaborative Partnerships
- 3. Target Population
- 4. Evidence-Based Services and Supports
- 5. Data Collection, Performance Measurement, and Program Evaluation
- 6. Sustainability
- 7. Technical Assistance Plan



Development of TA Plans

- Each TA coach will work with the grantees to develop a training and technical assistance plan.
- This will lay out goals for TA that will be continuously reviewed and updated.
- The grantee will identify TA needs with the TA coach, and the grantee will work with the TA coach to meet the TA goals.
- This is all focused on moving the grantee forward to meet their grant milestones.





FY21 Communities of Practice (CoPs)

- 1. Intercept 0
- 2. Intercept 1
- 3. Gender-Responsive Services for Women
- 4. Data and Information Sharing
- 5. Addressing the Needs of Rural Communities



FY21 Communities of Practice (CoPs)

Four sessions for each CoP

Interactive

Peer learning and networking opportunity

Will partner with national subject matter experts

2022 JMHCP Grantee Convening

Virtual event to be held in July (date TBD)

All FY20 and FY21 grantees to attend

Topical plenary and breakout sessions

Connection with peers and experts



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Grantee Experience – Boston PD

Previous JMHCP Grants

• FY10, FY13, FY16, and FY19 JMHCP Grant awards

Previous JMHCP Goals

- FY10: Formalizing/expanding BPD-BEST partnership, educating BPD officers
- FY13: Expansion of co-responder program, continued officer training, increased coordination across BPD, BEST and Boston EMS
- FY16: Continued expansion of co-responder program, implementation and evaluation of a dedicated car pilot program
- FY19: Improved data tracking, citywide outreach pilot program, implementation of a telemedicine approach







Grantee Experience – Boston PD

Previous JMHCP Outcomes

- FY10: Mandatory BPD eLearning curriculum, expanded BEST call center support
- FY13: Hired a full-time BEST clinician for Area E (subsequently moved to Area C); ultimately unable to increase coordination with Boston EMS
- FY16: Supported a full-time BEST clinician in Area C until grant funds expired;
 completed and evaluated a dedicated car pilot program in District C-11
- FY19: Support for new Street Outreach Unit and evaluation of new Section 12 protocol, provision of recovery coach services
 - Significant changes due to internal changes at BPD (establishment of SOU), onset of pandemic, and widespread anti-police sentiment





Grantee Experience - Colorado Division of Criminal Justice

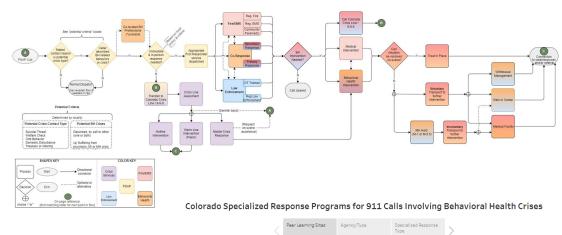
- Previous JMHCP Grants FY19
- Previous JMHCP Goals
 - Statewide effort to develop alternative responses to behavioral health involved 911 calls to reduce criminal justice outcome
 - Integrate behavioral health services as part of emergency response
 - Finish with a connection to services

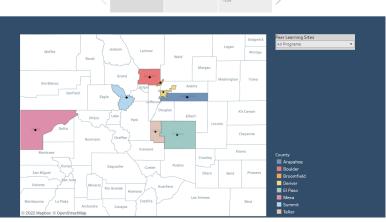




Grantee Experience - Colorado Division of Criminal Justice

- JMHCP Outcomes:
 - Defining and flow-charting the specialized response options
 - Surveying & mapping specialized responses
 - Establishing State Learning Sites
 - Making training accessible for emergency communication centers
 - Developing Planning Process Tool for jurisdiction specific specialized responses
 - Identifying resources to implement specialized responses







Panel Discussion

- 1. How has TA been beneficial to your program?
- 2. Did you make any changes from your original project?
- 3. How would you recommend new grantees utilize the TA, especially during the planning phase (communities of practice, reoccurring monthly TA calls, completing the planning and implementation guide) to advance their program goals?
- 4. Do you have any advice for grantees that plan to use their funding to hire an individual to join their team?



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Questions and Answers



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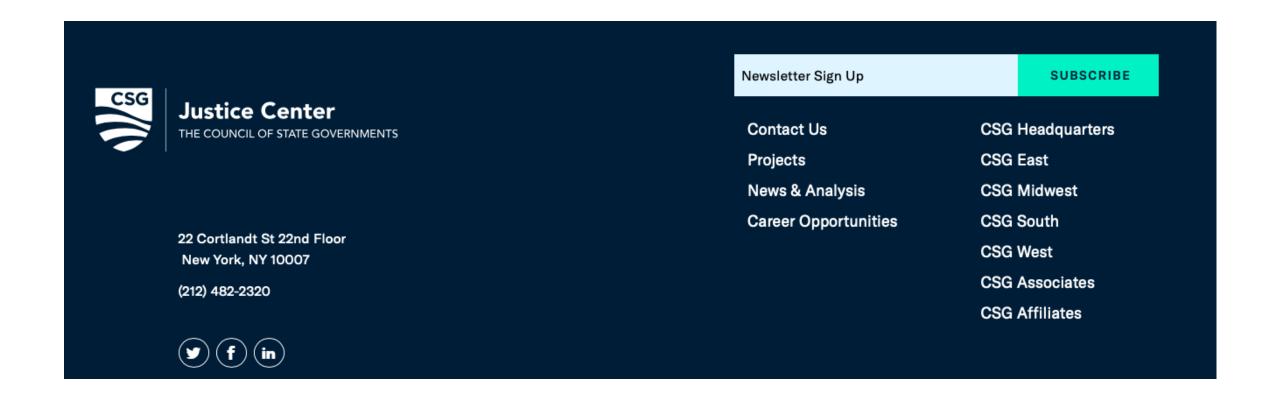
Resources

- Collaborative Comprehensive
 Case Plans: https://csgjusticecenter.org/nrrc/collaborative-comprehensive-case-plans/
- Police-Mental Health Collaboration Toolkit: https://pmhctoolkit.bja.gov/
- Law Enforcement Mental Health Learning Sites: https://csgjusticecenter.org/law-enforcement/projects/mental-health-learning-sites/





Monthly Behavioral Health Newsletter





Thank You!

Join our distribution list to receive updates and announcements:

https://csgjusticecenter.org/resources/newsletters/

For more information, please contact Julia Kessler at jkessler@csg.org

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