

THE
STEPPINGUP
INITIATIVE

Responding to Familiar Faces in Crisis Part 3

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April 26, 2022



Agenda

- Welcome, Introductions, and Overview of Stepping Up and Safety and Justice Challenge
- Bernalillo County, New Mexico
- Fulton County, Georgia
- Polk County, Iowa
- Questions and Answers

Panelists

- **Margarita Chavez-Sanchez**, Director, Department of Behavioral Health Services, Bernalillo County, NM
- **Nicholas Heaghney**, Court Policy Analyst, Superior Court of Fulton County
- **Kristin Schillig**, Court Support Manager, Superior Court of Fulton County
- **Charlie Verploegh**, Assistant Director, Department of Behavioral Health Services, Bernalillo County, NM
- **Maria Walker**, Program Planner, Polk County Behavioral Health and Disability Services

The Stepping Up Initiative and The MacArthur Foundation Safety and Justice Challenge



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THE STEPPINGUP INITIATIVE

Stepping Up is a national initiative to reduce the number of people with mental illnesses and co-occurring substance use disorders in jails.



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#StepUp4MentalHealth
www.StepUpTogether.org

States Supporting Familiar Faces Project Preview

- National initiative to elevate the role of states in improving outcomes for familiar faces and for the systems that serve them
- This project will position two states to enact policy changes that build local capacity to improve responses to familiar faces by:
 - Using data to identify and better serve familiar faces
 - Promoting the use of pre-arrest diversion
 - Building and scaling community-based behavioral health services, crisis systems, and housing

Three-Part Webinar Series Featuring Three Stepping Up and SJC Sites

- Three Sites
 - Bernalillo County, New Mexico
 - Fulton County, Georgia
 - Polk County, Iowa
- Three-Part Webinar Series
 - Part 1: May 13, 2021 (recording available)
 - Part 2: November 18, 2021 (recording available)
 - Part 3: April 26, 2022 (today)

Bernalillo County, NM

Margarita Chavez-Sanchez, Director, Department of Behavioral Health Services

Charlie Verploegh, Assistant Director, Department of Behavioral Health Services



Behavioral Health Initiative

- Contracts with community behavioral health providers
- How can community services support the need of high utilizer populations?

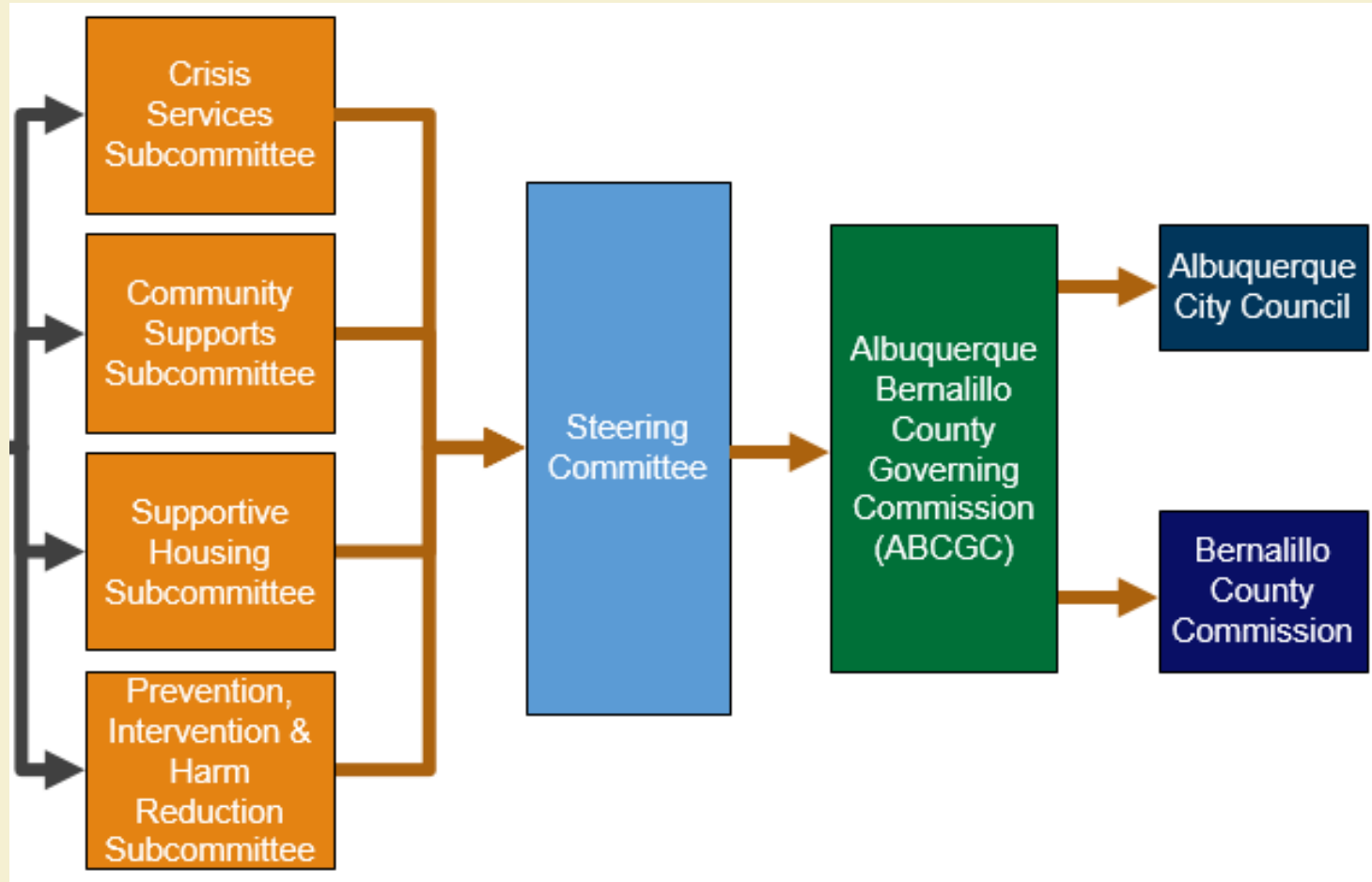


History of the Behavioral Health Tax

- 2014 Ballot initiative to impose a ⅛ of 1 percent gross-receipts tax
- Tax implemented in July 2015
- Community Partners Inc. (CPI) developed a roadmap for including community input and creating a governance structure.



Behavioral Health Initiative



Behavioral Health Initiative: Prevention

Adverse Childhood Experiences (ACES)



Suicide Prevention



School-Based Health Centers



Behavioral Health Initiative: Community Supports

Peer Case Management



Peer Drop-in Centers



Living Room Model



Behavioral Health Initiative: Crisis

Mobile Crisis Teams (MCT)



639 crisis calls dispatched per quarter, approx. 30,500 calls since inception.

- 6 MCT Law Enforcement
- 2 FMCT Non Law Enforcement

Resource Reentry Center (RRC)



June 2018 through March 2022 a total of 45,850 individuals exited through RRC. Average engagement rates (one or more service) is 84%.

- Familiar Faces flagging alert
- Warm hand-off to long term care
- Metro competency court- step down from jail to CSU

Crisis and Stabilization on the CARE Campus



Established in December 2019 in a pilot phase with limited capacity. Since opening this unit has served approx. 300 clients.

- 16 bed/14 day
- Therapeutic support/Case Management

Behavioral Health Initiative: Housing

Scattered Site Housing



Single Site Housing



Youth Transitional Living



Tiny Home Village



Fulton County, GA

Nicholas Heaghney, Court Policy Analyst, Superior Court of Fulton County

Kristin Schillig, Court Support Manager, Superior Court of Fulton County



Building Data Capacity and Using Data

Data Sources

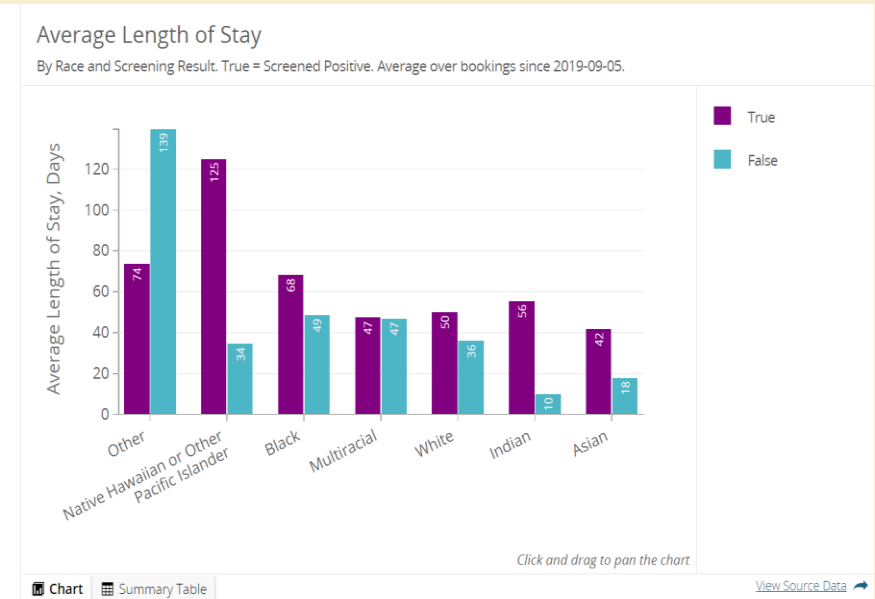
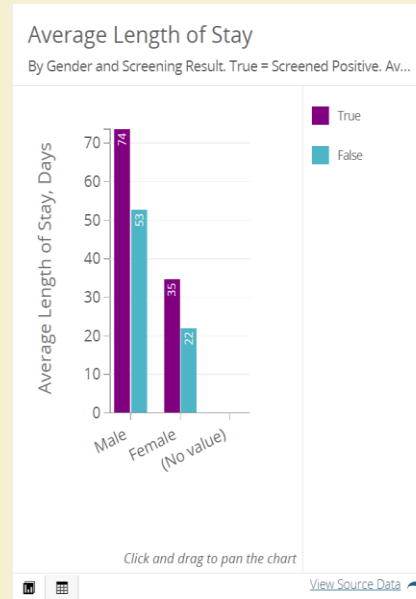
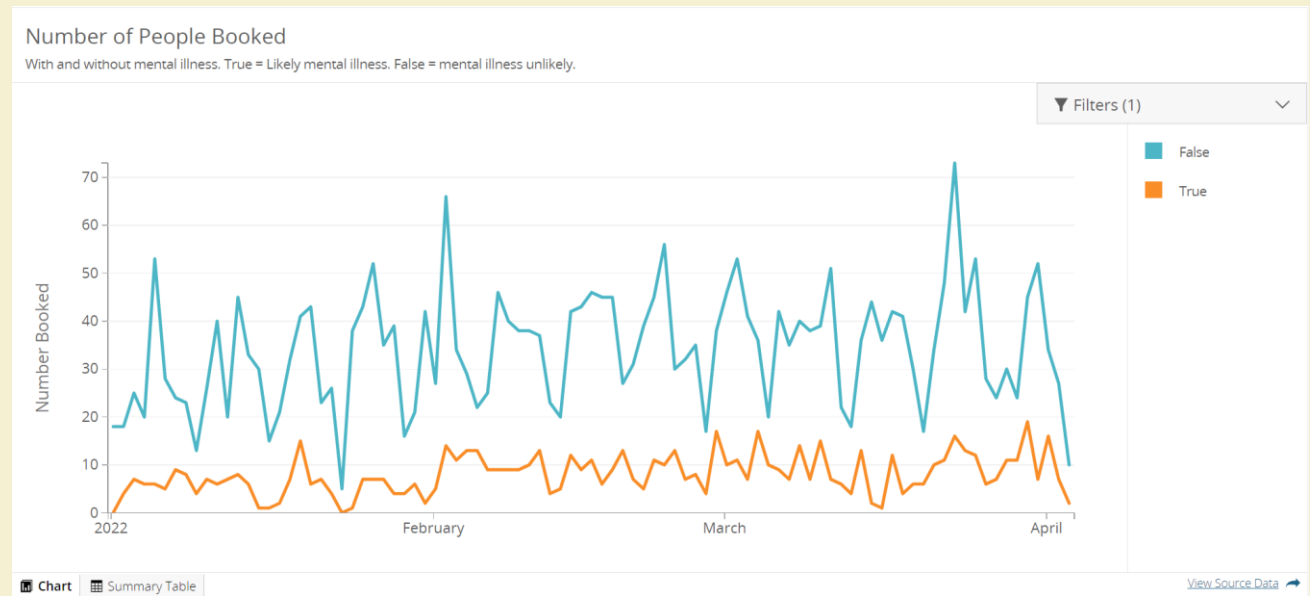
- Odyssey—County Criminal Justice Data Management System
- Socrata—Data Dashboard/Asset/Visualization Platform
- Fulton County Dept. of Behavioral Health—Mental Health Screening Database

Data Uses

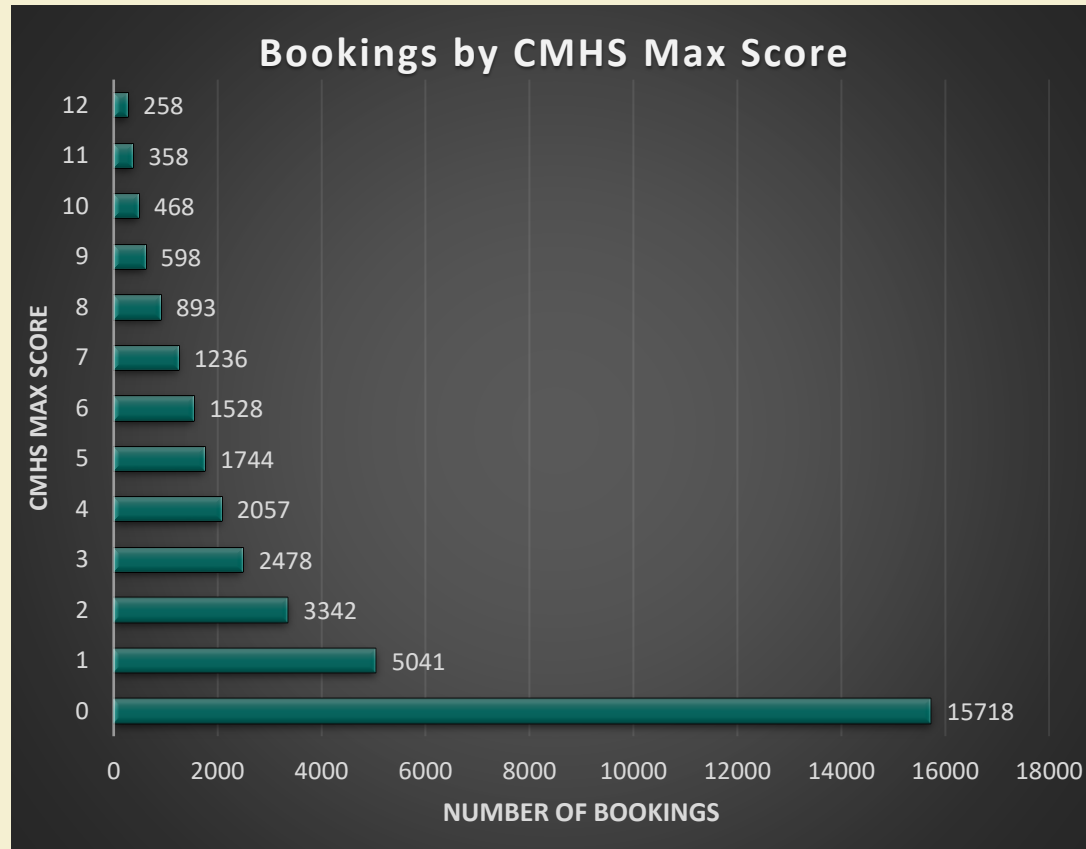
- Daily Booking List
 - Identification of familiar faces
 - All positive screens
- Identification of Cases
 - Case #s, Charges, Past and Upcoming Hearings, Judges, Bonds
- Technical Violations
- Building Capacity around Warrants
- Data-Sharing Project

Building Data Capacity and Using Data

- Building Data dashboards has allowed for drilling down more granularly into data, whether that's looking at jail bookings by screening status per day or demographic breakdowns.
- Data have been tailored to Stepping Up Key Measures for aggregation purposes, but also allow for analysis at the individual level and serve as a historical repository of information.
- Data that does not lend itself to visualization (think cases and upcoming hearings) is available for agencies (public defender, pretrial) that may need it.



Using Data to Identify Service Needs



- Sept. 2019–Feb. 2022
 - **42,149** total bookings
 - **35,719 (85%)** of people booked received screening
 - **7,083 (16.8%)** of bookings were for people who screened **positive (score of 5+)** for mental illness on at least one booking
- Reentry Group tasked with providing plans/services to all positively screened individuals

Using Data to Identify Service Needs

Current Uses

- Live data feeds and linkage to mental health screens allow for long-term tracking of individuals
- Reentry Group focuses on staffing cases and putting together reentry plans for all high-need individuals
 - Group consists of legal and community stakeholders including behavioral health and housing providers

In Progress

- Implementing housing screening
- Data-integration project
- Center for Diversion and Services
 - Case-management framework and software

Data-Integration Project

Origin/Purpose

- #1 data recommendation from Fulton County Justice and Mental Health Taskforce
- City and county systems traditionally work in their own silos with little collaboration and coordination
- Effort to break down those silos and work together to increase efficiency and effectiveness

Concept

- Basic data-sharing software that will serve as a foundation for building further data integration
 - Envision a scaled up concept at Center for Diversion and Services
- Initial system would serve as a “phonebook” for participating individuals/agencies whereby relevant caseworkers could connect with each other and reconnect individuals to appropriate programs and services

Data-Integration Project

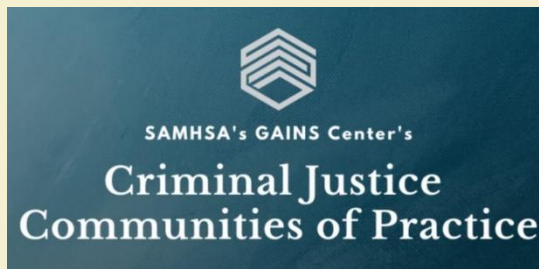
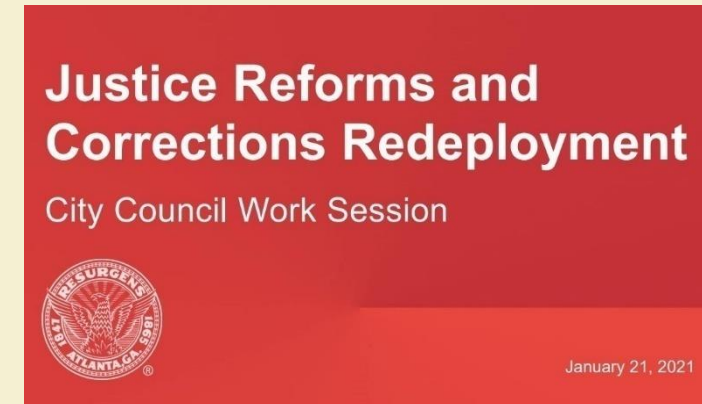
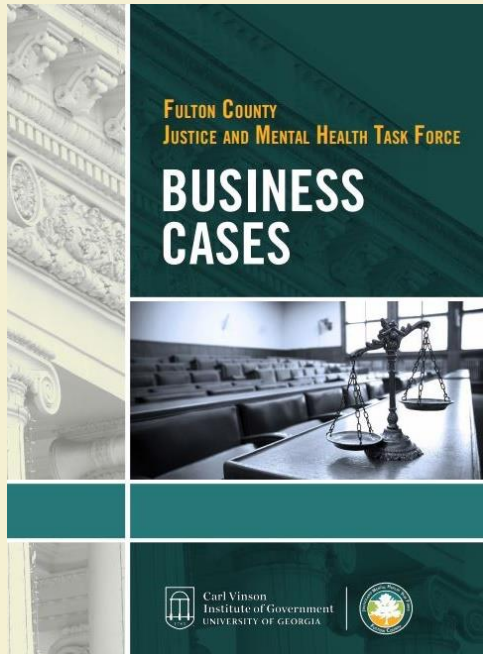
Present Work

- Collaborative biweekly meetings with participating agencies
- Data-sharing MOU/Universal ROI
 - County attorney's office leading work with input from partner agencies
 - Adapted Bernalillo County documents
- Technology Partner—Tyler Technologies
 - Mock-up of data-query tool
 - Hosting feedback sessions from potential users
- Standard Operating Procedures/Evaluation Metrics

Atlanta's Center for Diversion and Services: Opening Spring 2023



Multiple initiatives generated momentum for an alternative to jail for people experiencing behavioral health concerns and extreme poverty



Creating “somewhere else to go” advances city and county goals to reduce de facto use of jails as crisis centers



- 22,000+ people detained at Atlanta City Detention Center (ACDC) between 2017–2020 were held for charges associated with homelessness, mental illness, and substance use (30%)
- Since September 2019, 8,206 bookings at Fulton County Jail have been for individuals who have screened positive for mental illness (17.7 percent of all bookings). The average length of stay for people with mental illness is 64 days compared to 41 days for people who don't screen positive for mental illness.
- 10,000+ Fulton County bookings between 2017–2019 were for low-level charges associated with homelessness, mental illness, and substance use

Sources: Fulton County Justice & Mental Health Task Force; Fulton County Superior Court

Strategic Location in Downtown Atlanta

- 8,000 sf on 2nd floor (of 471,000 sf)
- Separation between DOC and Diversion
- Dedicated entry
- Easy transfer from vehicles
- Potential for outdoor space



First responder and law enforcement unloading

● Diversion Center Dedicated Entry

Diversion Center Location



Center for Diversion and Services at Atlanta City Detention Center (ACDC)



- Potential to **divert 10,500 jail bookings annually** from ACDC and Fulton County Jail
- **Potential to divert 4,400 police custody admissions** from Grady's ER and Psychiatric ER Services

What is the Center for Diversion and Services?

A law-enforcement drop-off point offering co-located services and connections to additional resources for people experiencing mental illness, substance use issues, and extreme poverty

- Efficient law enforcement drop off (prearrest diversion)
- Screening and needs assessment
- Sobering room
- Peer support and referrals
- Housing assessment and placement
- Case management and legal aid
- Non-emergency medical care (basic wound care, health screenings)
- Warrant resolution clinic (reduce bookings on technical violations)
- Amenities: pantry, laundry, showers, lockers, MARTA cards, living room, meals

Goals

1. Provide a service-based response to people with mental illness, substance use issues, and chronic homelessness, avoiding the criminal justice system as a form of response.
2. Reduce the number of people with mental illness, substance use issues, and chronic homelessness from entering the city and county's jails.
3. Connect clients to services in the community.
4. Preserve law enforcement and medical resources.
5. Build out a full continuum of care over time to serve the Atlanta metro area.

Milestones to Date

- November 2021: **Intergovernmental Agreement (IGA) signed** by City and Fulton County to create Diversion Center and establish a Justice Policy Board. \$100K funds from **Georgia Power Foundation** granted
- December 2021: **Conceptual design developed**
- January 2022: Agreement signed governing the shared use of the building between the **Center for Diversion and Services and the Department of Corrections**
- January 2022: First official meeting of the **Justice Policy Board**
- February 2022: **Mayor Dickens passed additional legislation** to advance the project
- March 2022: \$265K funds from **Microsoft** granted to cover A&E work
- April 2022: A&E work begins!

Polk County, IA

Maria Walker, Program Planner, Polk County Behavioral Health and Disability Services



Overview

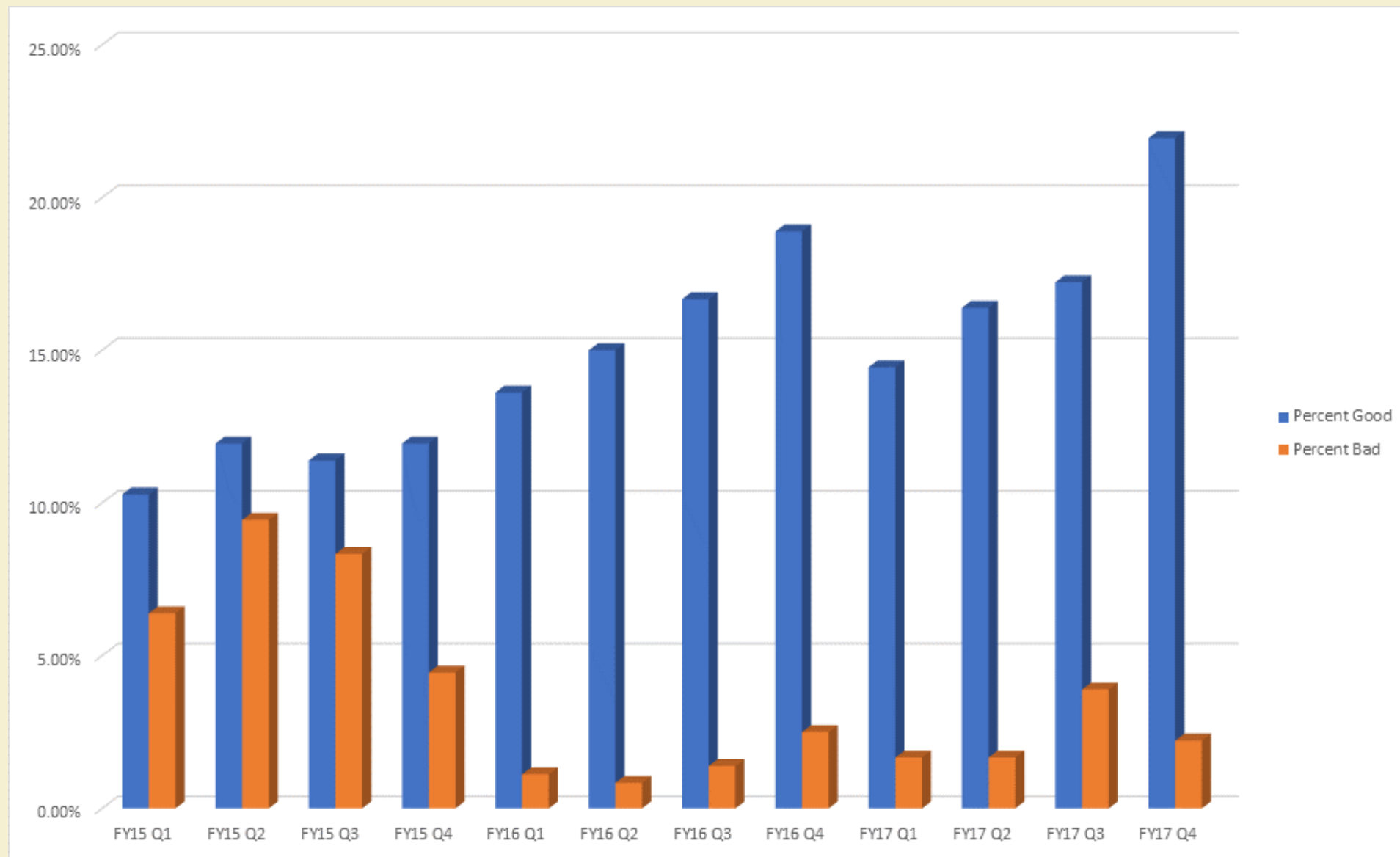
- Background
 - Chronic shortage of human services professionals across the continuum
 - Staff shortages impact the overall wellbeing of agencies and their ability to meet the needs of the community
 - No identified target demographic to recruit professionals
- Strategic plan created to:
 - Identify barriers in building a sustainable workforce
 - Create solutions for building a human services workforce that meets the needs of Polk County
 - Initial efforts aimed at front-line workforce (direct support staff)

Role of the Region: Polk's Sense of Urgency

- Iowa Code: 441—25.4(331) Access standards
 - Requires the Region to ensure **access to services** within specific timeframes
 - Supported Community Living—requires services to be in place within 4 weeks of referral
 - Supported Employment—requires first unit of service to take place within 60 days of referral
 - Service Coordination—requires services within 10 days of referral
 - Mobile Response—requires 24/7 access, within 60 minutes
 - Community Based Crisis Response—within 120 minutes
 - Residential Based Crisis Response—within 120 minutes

Lack of access to services impacts individuals' community-based treatment and recovery. If unresolved, will result in large, congregate institutions and a never-ending cycle of crisis.

When we focus on employment, education, community inclusion, and housing (“Percent Good” events), jail days, ER visits, inpatient days, and homeless days (“Percent Bad” events) go down!



Strategic Partnerships—It Will Take a Village

- Education Sector
 - Department of Education
 - Community Colleges
 - Local School Districts (School Boards)
 - School Administrators of Iowa (Superintendents)
- Health and Human Services
 - Iowa Medicaid, Department of Human Services, Iowa Department of Public Health
 - Providers and Associations
 - Advocates
- Business
 - Workforce Development, Greater Des Moines Partnership (Local Chamber)
- Policy
 - Iowa Legislature and Governor
 - Federal Congressional Leaders
 - County Supervisors
 - Taxpayer Association

Early Identified Opportunities

- Professionalize Direct Support Professional Workforce
 - Assign a Standard Occupational Code
 - Implement nationally recognized, competency-based training that allows for levels of proficiency
- Reduce administrative burden (red tape)
 - Iowa has one of the most restrictive Medicaid documentation requirements nationally
- Attract the right workforce
 - Improve awareness, visibility, recognition of direct care field professionals
 - Address compensation rate for services

Direct Support Professionals

They're Kind of a Big Deal!

- They provide person-centered supports
 - For people with complex needs (multi-occurring diagnosis)
- They support the Whole Person in all facets of their life (see next slide)
- The demand for DSPs is increasing (estimated 900,000 FTE)
- Yet:
 - Not recognized by the Federal Bureau of Labor
 - No standard occupational code (SOC)
 - Primarily funded with Medicaid Waiver dollars
 - Low rates don't allow for adequate pay

NADSP Competencies	DSP	NA	HHA	PCA	LPN
Participant Empowerment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Assessment	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Community and Service Networking	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facilitation of Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Community Living Skills and Supports	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Education, Training and Self-Development	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Advocacy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vocational, Educational and Career Support	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crisis Prevention and Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Organizational Participation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Documentation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Building and Maintaining Friendships and Relationships	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provide Person-Centered Support	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supporting Health and Wellness	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

NADSP E-Badge Academy—Our Why

- Provides an online option to gain certification based on demonstrated competency
- Nationally vetted competencies
 - FLS—University of Minnesota’s Institute for Community Inclusion (UCEDD) researched and vetted set of competencies
 - DSP—NADSP competencies are CMS’s core competencies (along with code of ethics) and the only LTSS approved training curriculum recognized by DOL
- Flexible enough to add competencies important to the Polk Region
 - NADD’s multioccurring training
 - PBS philosophy and tools (i.e., motivational interviewing)
- E-Badge is researched—secondary, postsecondary, and businesses with training standards are moving toward this model of training
 - Gratification for badges in small increments
 - Mobile—badges/certifications stay with the learner
 - Becoming nationally recognized
 - Not able to get people into training seats

NADSP E-Badge Academy—Our Why

- Comes with management information system to track where learners are, badges earned
 - Thanks to New York State infusing \$10 million ARPA money into NADSP E-Badge, the system will get an upgrade for enhanced tracking
 - Allows us to also track bonus/incentive payments attached to certification levels
- Ability to accredit own training curricula or utilize well-established training
 - Polk FLS Collaborative via NADSP FLS Train-the-Trainer Curriculum (original pilot)
 - Providers—Optimae LifeServices
 - Relias
 - College of Direct Support
 - Others
- Works well for us to manage on behalf of network of providers
- We believe the competencies have legs to become the standard of training once standard occupational code is established and there is a movement to standardize training curriculum

NADSP Certification and Turnover Rates

DSPs through the E-Badge Academy remain in their jobs at a significantly higher rate than their non-certified colleagues, providing a significant return on an organization's investment and saving scarce financial resources.

E-Badge Academy Organization	Location	Average Annual Turnover All DSPs (2019-2020)	Average Annual Turnover Certified DSPs (2019-2020)
Black Hills Works	Rapid City, South Dakota	47.15%	10.45%
Penn-Mar Human Services	Glen Rock, Pennsylvania	36.55%	7.50%
Arc Mid-Hudson	Kingston, New York	45.95%	4.41%

Questions and Answers



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