

Improving Police and Mental Health Partnerships for Youth in Crisis

July 12, 2023 | 2:00-3:30 p.m. ET

Presentation Outline

- I. Welcome and Introductions
- II. The Mobile Response and Stabilization Services (MRSS) Program
- III. MRSS in Practice: An Example from Atlantic City, NJ, Police Department and PerformCare
- IV. Questions and Answers



Speakers

- Steven Diehl, Senior Policy Analyst, Behavioral Health, CSG Justice Center
- Felicia Lopez Wright, Project Manager, Behavioral Health, CSG Justice Center
- Elizabeth Manley, Senior Advisor for Health and Behavioral Policy, Innovations Institute, University of Connecticut School of Social Work
- Sergeant Brian D. Shapiro, Atlantic City Police Department



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.

Karhlton F. Moore, BJA Director



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The Council of State Governments Justice Center

We are a national nonprofit, nonpartisan organization that combines the power of a membership association, serving 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

High rates of recidivism increase taxpayer costs, diminish public safety, and tear apart families and communities. We work with partners inside and outside of government to reduce crime and incarceration among youth and adults in contact with the justice system.

Advance health, opportunity, and equity

Efforts to make communities safer and healthier are hampered by insufficient behavioral health services, barriers to economic mobility, homelessness, lack of support for victims, and racial and gender inequity. We bring people from diverse systems and perspectives together to improve policy and practice related to these challenges.

Use data to improve safety and justice

Data holds the power to help us understand and change justice systems for the better. And yet, states and counties still know far too little about how their systems perform. Our work transforms information into meaningful insights for policymakers.



Equity and Inclusion Statement



The Council of State Governments Justice Center is committed to advancing racial equity internally and through our work with states, local communities, and Tribal Nations.



We support efforts to dismantle racial inequities within the criminal and juvenile justice systems by providing rigorous and high-quality research and analysis to decision-makers and helping stakeholders navigate the critical, and at times uncomfortable, issues the data reveal. Beyond empirical data, we rely on stakeholder engagement and other measures to advance equity, provide guidance and technical assistance, and improve outcomes across all touchpoints in the justice, behavioral health, crisis response, and reentry systems.

Justice and Mental Health Collaboration Program

The Justice and Mental Health Collaboration Program (JMHCP) promotes innovative cross-system collaboration and provides grants directly to states, local governments, and federally recognized Indian Tribes. It is designed to improve responses to people with mental health conditions and substance use disorders who are involved in the criminal justice system.



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Why Police and Behavioral Health Partnerships for Youth in Crisis?

- Law enforcement are often the first responders for behavioral health calls for service.
 - This may lead to unnecessary involvement with the juvenile justice system instead of crisis stabilization.
- Behavioral health and law enforcement partnerships support youth's diversion to a system of care that supports recovery and stability within the community.



Healing from Trauma

- "What works best is anything that increases the quality and number of relationships in a child's life. People, not programs, change people." *Dr. Bruce Perry, Mind and Heart Foundation*
- New research supports that much of the healing from complex trauma can take place in non-clinical settings.
- Trauma-informed living environments in which healing can take place are a precursor to any formal therapy.
 - This is the key ingredient in the therapeutic transformation.





Mobile Response and Stabilization Services (MRSS) Program Design and Intent

Specifically designed as an upstream intervention to

- Meet the needs of children, youth and young adults, and their parents or caregivers;
- De-escalate and ameliorate a crisis before more restrictive and costly interventions become necessary; and
- Ensure connection to necessary services and supports.
- Key services that shift from overuse of high-end services and supports to home- and community-based services

National Association of State Mental Health Program Directors, <u>Making the Case for a Comprehensive</u> <u>Children's Crisis Continuum of Care</u>, (Alexandria, VA: NASMHPD, August 2018).



National Association of State Mental Health Program Directors 66 Canal Center Plaza, Suite 302 Alexandria, Virginia 22314

Assessment #8

Making the Case for a Comprehensive Children's Crisis Continuum of Care

August 2018

Alexandria, Virginia

Eighth in a Series of Ten Briefs Addressing: Bold Approaches for Better Mental Health Outcomes across the Continuum of Care

This work was developed under Task 2.2 of NASMHPD's Technical Assistance Coalition contract/task order, HHSS2832012000211/HHS28342003T and funded by the Center for Mental Health Services/Substance Abuse and Mental Health Services Administration of the Department of Health and Human Services through the National Association of State Mental Health Program Directors.



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MRSS Goals

Maintain	 Maintain youth in their current living situation and community environment, reducing the need for out-of-home placements, which reduces the need for inpatient care and residential interventions.
Support	Support youth and families in providing trauma-informed care.
Promote	Promote and support safe behavior in home, school, and community.
Reduce	 Reduce the use of emergency departments (ED), hospital boarding, and detention centers due to a behavioral health crisis.
Assist	 Assist youth and families in accessing and linking to ongoing support and services, including intensive clinical and in-home services, as needed.



Customized for Children, Youth, Young Adults, and Their Families

- Parents or caregivers and youth have the most influence and say regarding all aspects of MRSS service delivery.
- Components and practices for youth and their families remain even when embedded in a lifespan response system.
- Includes identification of the youth and family's needs and strengths, risk factors, and cultural considerations and preferences.



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Customized for Children, Youth, Young Adults, and Their Families

- Employs trained and certified or credentialed providers, including parent and youth peers, with expertise and experience in child and adolescent behavioral health and family systems
- Provides routine outreach and educational activities to the community and system partners that is specific to the needs of youth and their families
- Prioritizes safety and de-escalation in community settings with connections to natural supports





Grounded in System of Care Values and Principles

- MRSS is a rapid response, home- and community-based crisis intervention model customized to meet the developmental needs of children, youth, young adults, and their families.
- MRSS is embedded within a full spectrum of effective services and supports for youth with or at risk of behavioral health and emotional challenges.





Grounded in System of Care Values and Principles

MRSS is designed to:

- Work with the young people, family, and youth to serve systems with shared population responsibility such as schools, courts, child protection, early intervention, and juvenile justice.
- Engage informal supports within the care planning process.
- Intercede before a crisis gets to the point where the young person and their family feel the need to turn to more restrictive and less desirable options.



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Meets the Sense of Urgency with Urgency

- ✓ The crisis is defined by the parent or caregiver or youth.
- ✓ Requests are not screened in or out based on perceived acuity; uses a "just go" approach.
- ✓ Requests for help are attended to rapidly and consistently.
- ✓ Uses a public health approach; all youth and families are eligible.
- ✓ 24/7/365 face-to-face response







Mobile Response



Young adult or family defines the crisis

Crisis de-escalation

Assessment





Stabilization Services

Provided in the home and community

Connection to community supports and services

Reconnection with activities such as sporting activities, arts such as acting and painting, extracurricular activities within the school as examples

In-home clinical support for the youth and family

Connection to higher level of support if necessary





System Coordination and Community Collaboration Partners

Child Welfare

Juvenile Justice

Family Courts

Education

Pediatricians/Primary Care

Law Enforcement

Emergency Departments Community Organizations



Develop Concrete Collaborative Agreements or Partnerships

- Behavioral health systems
- Child welfare systems
- Juvenile justice systems
- School systems
- Intellectual and developmental disability systems

- Emergency departments and hospitals
- Law enforcement agencies
- Poison control emergency medical systems
- Family and youth or young adult-run organizations





Interruption Points

- Places in the pathway(s) that system leaders need to intervene to change the experiences of families and address the identified problem
- Interruption points are opportunities for system leaders to change care pathways or create new pathways.





Ensure Routine and Overt Quality Assurance across All System Levels to Track Important Outcomes

Increased diversion and financing going to prevention and home and community-based supports

Behavioral health access and treatment to address disparities

Emergency room visits for behavioral health needs Police response due to behavioral health needs

Residential intervention use

Inpatient hospital stays

School attendance, graduation, suspension, and expulsion rates Juvenile justice involvement, detention, and commitment rates

Child welfare involvement, out-of-home stays, incident reports with child protection, and placement disruptions

Expulsions and suspensions from childcare settings due to behavioral concerns

Engagement in primary care early childhood visits

Suicide rates

Feedback regarding family satisfaction





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Atlantic City, NJ, Police Department and PerformCare

- PerformCare established in 2009
- Connects young people in need of crisis stabilization to publicly funded services
- Single point of access that is available 24/7 across the entire state
- Helps divert youth from unnecessary system involvement and into ongoing behavioral health care



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Questions and Answers



Thank You!

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

For more information, please contact Felicia at fwright@csg.org

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