Moving Forward with Community Mental Health – What's Happening Now?

Vice Chairman John McIntyre
Board Member Susan Schafer

THE STEPPING UP INITIATIVE

McLean County

THE STEPPING UP INITIATIVE

McLean County

Accomplishments

- Follow up with treatment of individuals recently released from detention
- Crisis Planning Group
- Crisis Stabilization Unit and Medically Monitored Detox
- Local, State, and Federal Funding
- Mental Health First Aid
- CIT training for first responders
- Improving reporting and accountability
- Advocacy
- Business Partnerships

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Substance Abuse and Mental Health Services Administration SAMHSA

McLean County Government and McLean County Court Services, in collaboration with many community and state partners, are pleased to announce the receipt of a Federal Problem Solving Courts Expansion grant from the Department of Health and Human Services-Substance Abuse and Mental Health Services Administration (SAMHSA). SAMHSA will provide $325,000 annually for three years to serve 159 participants via an integrated, client-driven system of behavioral health care that improves outcomes for justice-involved adults in McLean County with substance use or co-occurring substance use and mental health disorders.

- The development of a unified problem solving courts infrastructure that will provide formalized processes to enhance the performance and sustainability of the McLean County problem solving courts and improve interagency collaboration
- The promotion of service integration by incorporating new behavioral health treatments, peer, and recovery support services that are evidence-based and consumer-driven
- Continuing comprehensive evaluation of the McLean County problem solving courts resulting in broadening evidence-based practice and knowledge and leading to continuous quality improvement
- Expansion of co-occurring mental health disorders into the adult drug court

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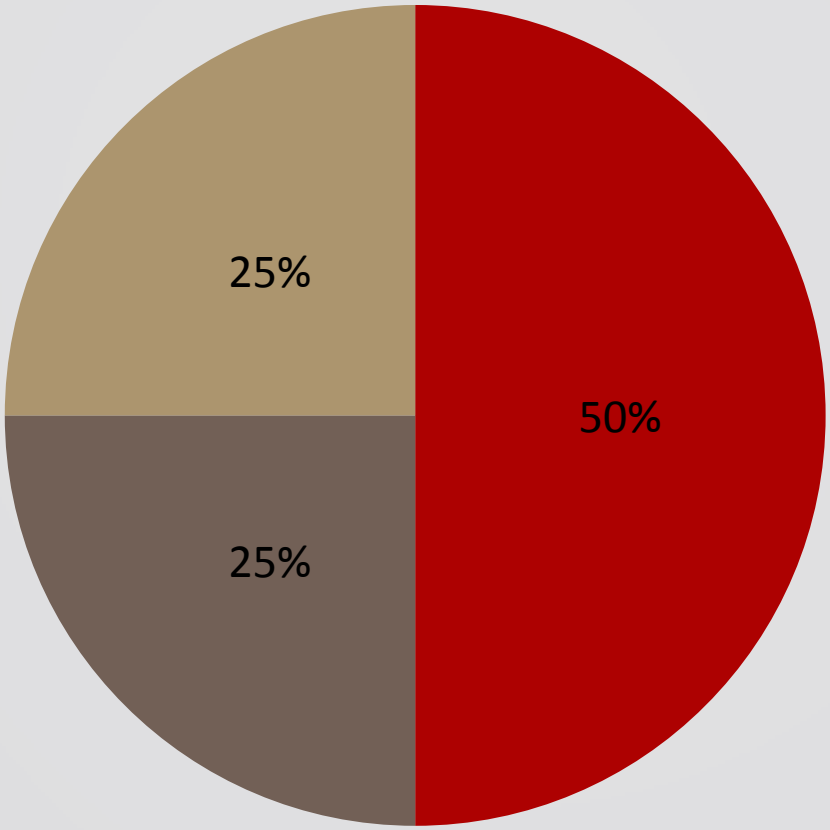
County

- Provide Leadership
- Health Oversight Committee
  - First meeting July 2015
    - Health Department
- Board of Health Mental Health Advisory Board
  - Members identified
- Diversified and alternative revenue
  - .25% sales tax
- Approved Jail expansion
  - Mentally Ill
  - Females
  - Medical facilities

Alternative Revenue



.25% Sales Tax

$3.8-$4 M

City of Bloomington

Town of Normal

- Community Initiatives, $1.8-$2 M
- Justice System Operations, $.8-$1 M
- Capital Expense, $1 M for 20 years

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Community Initiatives

- Expand and improve Case Management Systems integration
- Sequential Intercept Model
- Co-responder Program
- Grant Opportunities

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Stepping Up Initiative

- National Initiative through NaCo
- Johnson County, KS
  - Similar to McLean County
    - 2 large cities
    - Strain on Jail, hospitals (state and local), etc.
  - 1 ½ hour visit
    - Sequential Intercept Model
      - Action steps for Intercept 1
        - 911
        - Police
    - Co-Responder Program
      - With police
- Continuing to look at others with creative ideas utilizing evidence-based best practices.

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MENTAL HEALTH AND CRIMINAL JUSTICE

CASE STUDY: Johnson County, Kan.

POPULATION: APPROXIMATELY	JAIL BED CAPACITY:	AVERAGE DAILY JAIL POPULATION:
560,000*	1,100	650

PROJECT PARTNERS

Johnson County Mental Health Center
Johnson County Manager's Office
Johnson County Office of the District Attorney
10th Judicial District Court and Court Services
Johnson County Department of Corrections
Johnson County Sheriff's Office
10th Judicial District Public Defender's Office
National Alliance on Mental Illness Johnson County
Overland Park Police Department
Lenexa Police Department

CO-RESPONDER PROGRAM OUTCOMES

- The percentage of police calls that ended up in jail was already low, but fell slightly (2.4 percent to 1.5 percent pre- and post-initiative, respectively).
- The rate of hospitalization fell dramatically (53.7 percent before the co-responder program to 16.8 percent after), while referrals to services increased greatly (1.2 percent to 38.9 percent).
- The amount of ongoing treatment and supports to individuals with mental illnesses increased greatly (3.7 percent to 32.8 percent).
- Repeated law enforcement calls for service to the same individuals decreased dramatically following initial contact with the co-responder (average of 1.5 contacts per person to .616 contacts per person).

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Coordination/Collaboration

USING TECHNOLOGY TO IMPROVE INITIATIVES: JUSTICE INFORMATION MANAGEMENT SYSTEM (JIMS)

In the early 1990s, Johnson County developed the Justice Information Management System (JIMS) with the support of the County Manager's Office and the Board of County Commissioners to connect courts, law enforcement and corrections agencies to access records. JIMS also provides limited access to city police departments, attorneys and the public. This system was funded by the county and was developed specifically for its needs. It is staffed by a director and as many as 20 people with a current budget of around $2.3 million. It has proven to be an invaluable tool for planning and assessing policies and practices in Johnson County.

In January 1, 2010, a mental health referral flag (meaning that the individual is in need of on-going mental health services upon discharge from jail) was added in the Johnson County JIMS. The flag is used to determine the number of people entering the jail who are referred to the mental health team at the jail and also serves as an indicator for probation officers and others to connect individuals to treatment.

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Coordination / Collaboration

- Crisis Planning
  - Frequent flyers intensive case management
- Behavioral Health Coordination Council
  - People who can affect change
- Data gathering
  - Apples to Apples

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MENTAL HEALTH AND CRIMINAL JUSTICE

CASE STUDY: Mecklenburg County, N.C.

CRISIS INTERVENTION TEAM

The Charlotte-Mecklenburg Crisis Intervention Team (CIT) began in 2008 and has trained more than 800 law enforcement officers.

As the CIT program is a community-based collaboration between law enforcement and mental health agencies, the next step is to connect individuals with appropriate services in coordination with the National Alliance on Mental Illness (NAMI) Charlotte and other local service providers.

Coordination/Collaboration

MECKFUSE

In 2012, the jail diversion committee turned its attention to researching effective supportive housing models for people with mental illnesses that would reduce recidivism and costs, and discovered the Corporation for Supportive Housing's (CSH) Frequent User Systems Engagement, or FUSE, model. The committee engaged local housing organizations to participate in the planning effort for the initiative, including the **Men's Shelter of Charlotte** and the **Salvation Army Center of Hope**.

The resulting Mecklenburg County FUSE initiative (MeckFUSE) is an interagency effort. The contracted service provider**, Urban Ministry Center (UMC),** uses the list to perform in-reach to the jail and local shelters, as well as to those living on the street. The University of North Carolina at Charlotte has agreed to evaluate MeckFUSE over a three-year period.

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Behavioral Health Coordinating Council
Local Units of Government
Social Service Agencies
Mental Health Professionals
Local Hospitals
Colleges & Universities
EMTs
Employers
Primary Care Physicians
School Districts
Religious Organizations
Fire Departments
Law Enforcement

Crisis

- Crisis Planning Group
  - Originated by PATH and facilitated by McLean County Health Department
    - Crisis team
    - PATH
    - Hospitals
    - Service Providers
    - Government
    - First Responders
    - CIT Training
    - MHFA

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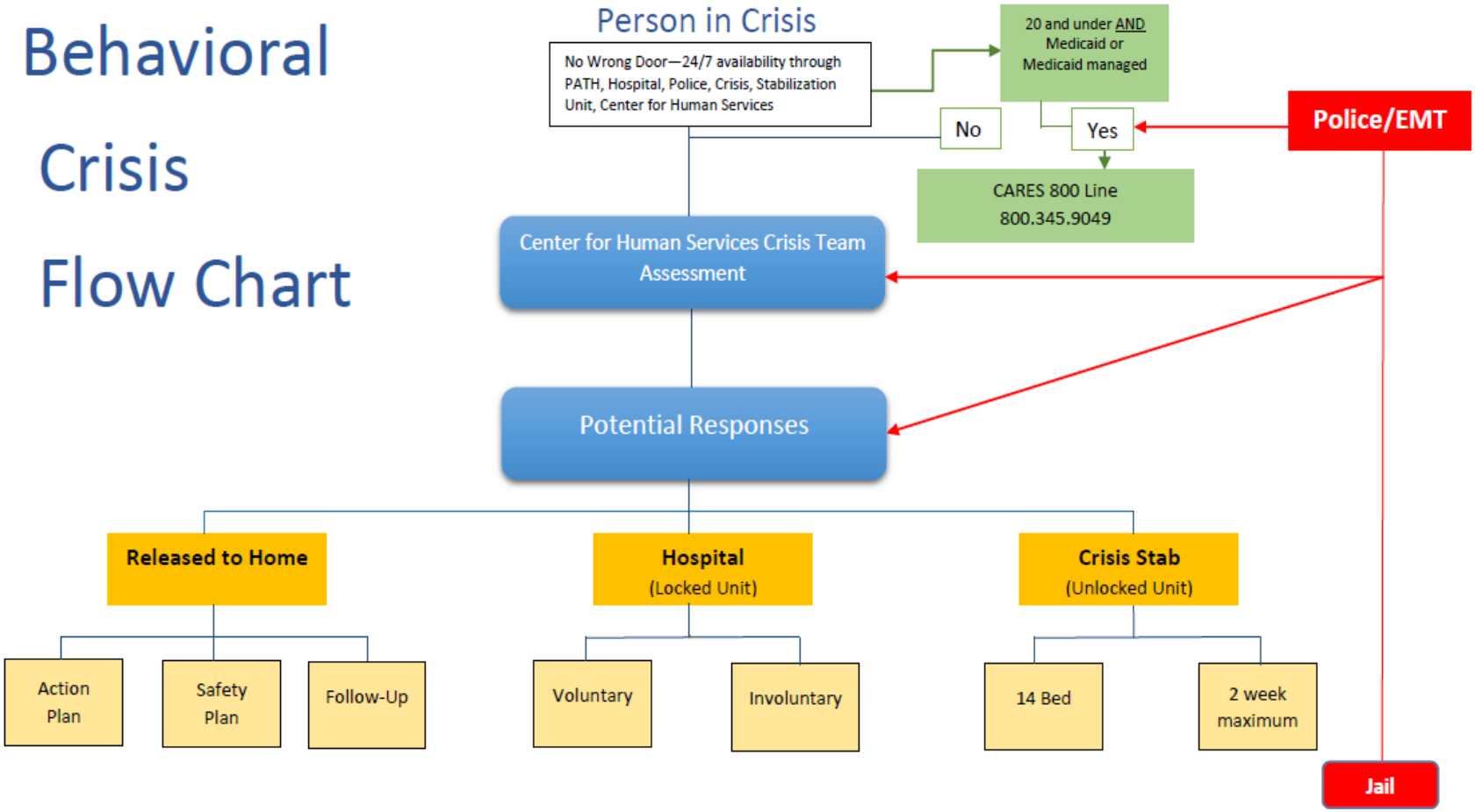
Behavioral Crisis Flow Chart



No Wrong Door: A person seeking help can be referred to crisis services through any organization (not limited to examples provided below).

Doctors | Employers | Churches | Family/Friends | Hospitals | Schools | Agencies

Vision: Continuity of Care

Crisis Stabilization Unit

- CSU opening April 2015
  - 74 Admissions through August 16
  - Admitting diagnoses: Depression, Bipolar disorder, PTSD, Anxiety
  - Average daily census for CRU: 5 patients
  - Referral Sources: Crisis Team, OSF and Advocate emergency departments, and self Average length of stay 4.7 days
- Detox opening July 2015
  - 83 admissions
  - Admitting Diagnoses: Alcohol withdrawal, Opiate Withdrawal; Benzodiazepine withdrawal
  - Average daily census for Detox: 5.17 patients
  - Referral sources: Self, probation, police, emergency department, crisis team, adult residential program
  - Average length of stay 6.2 days

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Mental Health First Aid

- 500 trained
  - Wide variety of people
  - Sheridan School – 32 elementary teachers
  - 85% female
  - 85% white, 9% African-American, 4% Hispanic
  - Fairly even distribution of ages
  - 100% recommend
    - Feel more confident in identifying crisis
    - More comfortable reaching out

- W2W Grant offset cost from $40 to $10
- Need Train the Trainers
  - Only 3 trainers in area

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Juveniles (21 and under)

- Challenges
  - Piecemeal funding streams
  - Out- of-county inpatient
  - Complexities
  - Outreach
  - Follow up
  - Family Services

- Fully functional system of care services
- Local inpatient psychiatric care
- Local Youth Crisis Stabilization Unit
- Supplemental funding and payment options

- ROE and MCHD
  - Juvenile Health Services System Transformational Planning Project - grant application
  - School and Social Service Agencies Survey

- Truancy Review Board - Identification and quick referral

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Housing

- LWV study
  - October 20, 6 pm, Normal Public Library
- Step-down
- Supportive
  - Step-down
  - Transitional
  - Permanent
- Safe, sanitary
- Disabilities
- Services available

THE STEPPING UP INITIATIVE

McLean County

MENTAL HEALTH AND CRIMINAL JUSTICE

CASE STUDY: Mecklenburg County, N.C.

METROPOLITAN CHARLOTTE POPULATION:	JAIL BED CAPACITY:	AVERAGE DAILY JAIL POPULATION:
1,012,539*	2,600	1,450

MECKFUSE PARTICIPANTS

- More than half of MeckFUSE participants have spent time in a jail or prison and most have spent years – if not decades – homeless prior to joining.
- More than half of MeckFUSE participants are on medication for a mental illness.

HOUSING

MECKFUSE PRELIMINARY OUTCOMES

The University of North Carolina at Charlotte has been contracted to evaluate MeckFUSE over a three-year period. Preliminary findings have shown that:

- MeckFUSE has been able to retain 88 percent of clients over an 18-month period
- Clients report better health ratings, increased access to services and fewer self-reported arrests/jail stays than the year prior to their participation
- MeckFUSE has been able to reduce cost burden to health care systems: the average annual bill pre-MeckFUSE was $4,358 (median: $1,600) compared to the average bill after entry into MeckFUSE at $1,261 (median: $819)
- The average number of hospital visits for MeckFUSE participants fell from 10 per year to two.

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References

- McLean County Action Plan
  - http://www.mcleancountyil.gov/DocumentCenter/View/5959
- Mental Health First Aid - $10
  - Adults - October 21
    - http://health.mcleancountyil.gov/calendar.aspx?view=list&year=2015&month=6&day=15
  - Youth - November 19
    - http://health.mcleancountyil.gov/calendar.aspx?view=list&year=2015&month=6&day=15
- PATH community services training - $35
  - October, November, February, April
  - http://www.pathcrisis.org/community-resources/online-database-2/

THE STEPPING UP INITIATIVE

McLean County

More References

- McLean County Health Department
  - http://health.mcleancountyil.gov/
- PATH – pathcrisis.org
  - http://www.pathcrisis.org/community-resources/online-database-2/

Contributors

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Mary Campbell	Labyrinth House
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McLean County Behavioral Health

A Public Health and Public Safety Issue

Stepping Up

McLean County as a whole needs to keep moving forward, addressing community wide challenges. It will take time and systemic change is neither easy nor smooth. Maximizing scarce local resources by everyone stepping up is imperative to the success of an effective community mental health system.

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One bite at a time