



Justice Center

THE COUNCIL OF STATE GOVERNMENTS

STATES SUPPORTING FAMILIAR FACES

LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

Hallie Fader-Towe & Amy Button

July 12, 2022

Agenda

I. Introduction

II. States Supporting Familiar Faces Project Overview

III. Opportunities in New Mexico

IV. Discussion

The CSG Justice Center

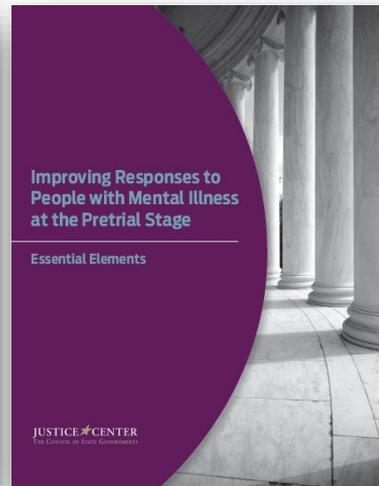
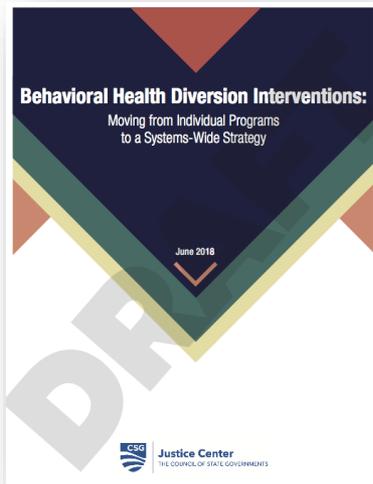
We are a national nonprofit, nonpartisan organization that combines the power of a membership association, serving state officials in all three branches of government, with policy and research expertise to develop strategies that increase public safety and strengthen communities.

The CSG Justice Center

Justice and Mental Health Collaboration Program



THE STEPPING UP INITIATIVE



Judges Psychiatrists Leadership Initiative

NOVEMBER 2018

Integrated Funding to Reduce the Number of People with Mental Illnesses in Jails: Key Considerations for California County Executives

In this guide:

- Introduction
- Key Considerations
- Resources to Facilitate Integrated Funding Planning
- Appendix A: How Did They Pay for That? Examples of Funding Sources for Policies, Programs, and Programs That Are Often Difficult for Counties to Fund
- Appendix B: County Examples

Introduction

It is not uncommon to hear California county leaders voice concern that there are too many people who have mental illnesses in their jails. At the same time, those familiar with local budgets know that health and public safety are generally the two largest expenditures in a county budget. Despite these investments, local leaders from almost every county in the state think there are more people who have mental illnesses in jail today than five years ago.¹

Many counties in California are engaged in intensive efforts to address this challenge, including through Stepping Up²—a national initiative to reduce the prevalence of people with mental illnesses in jails. Stepping Up calls on counties to shift the focus from jails and mental health programs to systems-level changes that can result in measurable reductions in the number of people with mental illnesses in jails.

Since Stepping Up launched in 2015, more than 50 California counties—representing almost 80 percent of the state's jail population—adopted a resolution in support of the initiative, and leaders from 15 counties attended the Stepping Up California Summit in January 2017. County planning teams pursuing this collaborative approach are using the initiative's framework to work with interagency leadership to use data and research-based principles to prioritize interventions and track progress.³ As these teams start to develop strategic plans and identify new funding opportunities, it is crucial that they implement strategies to efficiently maximize the reach of available dollars.

County executives are critical partners in this strategic dialogue necessary for achieving success results. That critical oversight over the county budget provides county executives the unique ability to set how different strategies funded through health or public safety budgets best fit together, as well as help ensure that overall spending is achieving system-wide outcomes.

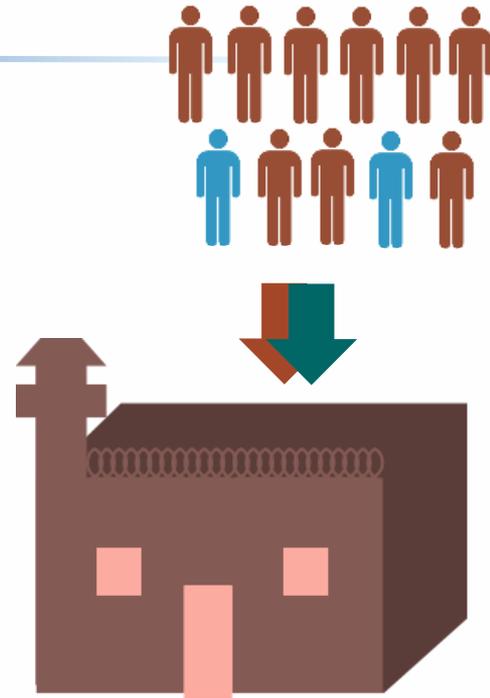
FIGURE 1. CALIFORNIA COUNTY SPENDING



National Estimates of This Crisis

Of the **11 million** jail bookings annually...

...approximately **2 million** involve a person with a serious mental illness (SMI).

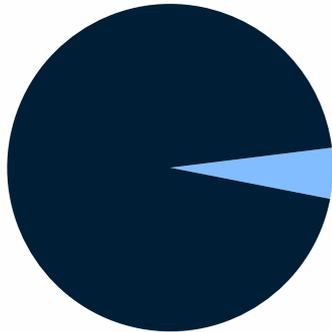


Steadman, HJ, Osher, FC, Robbins, PC, Case, B., and Samuels, S. Prevalence of Serious Mental Illness Among Jail Inmates, *Psychiatric Services*, 6 (60), 761-765, 2009.

Overrepresentation of SMI in Jails

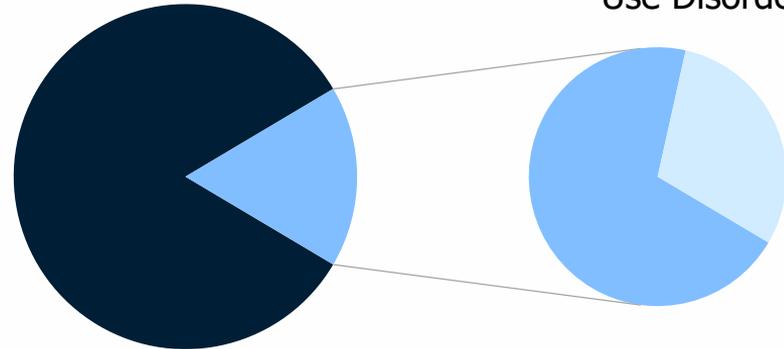
General Population

4% Serious
Mental Illness



Jail Population

17% Serious
Mental Illness 72% Co-occurring
Substance
Use Disorder



Source: Steadman, HJ, Osher, FC, Robbins, PC, Case, B., and Samuels, S. Prevalence of Serious Mental Illness Among Jail Inmates, *Psychiatric Services*, 6 (60), 761-765, 2009.; Center for Behavioral Health Statistics and Quality, *Key substance use and mental health indicators in the United States: Results from the 2015 National Survey on Drug Use and Health*, 2016 (HHS Publication No. SMA 16-4984, NSDUH Series H-51), <http://www.samhsa.gov/data/>; Abram, Karen M., and Linda A. Teplin, "Co-occurring Disorders Among Mentally Ill Jail Detainees," *American Psychologist* 46, no. 10 (1991): 1036-1045.

THE STEPPING UP INITIATIVE

Stepping Up is a national initiative reducing overincarceration of people with mental illnesses.



Justice Center
THE COUNCIL OF STATE GOVERNMENTS



#StepUp4MentalHealth
www.StepUpTogether.org

THE
STEPPING UP
I N I T I A T I V E



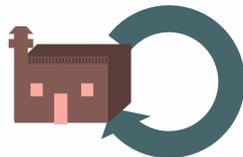
1. Reduce the number of people with mental illnesses booked into jails



2. Shorten the length of stay in jails for people who have mental illnesses



3. Increase connection to treatment for people who have mental illnesses



4. Reduce recidivism rates for people who have mental illnesses

JANUARY 2017

**Reducing the Number of People
with Mental Illnesses in Jail**
Six Questions County Leaders Need to Ask

Risë Haneberg, Dr. Tony Fabelo, Dr. Fred Osher, and Michael Thompson

1

Is our leadership committed?

2

Do we conduct timely screening and assessments?

3

Do we have baseline data?

4

Have we conducted a comprehensive process analysis and inventory of services?

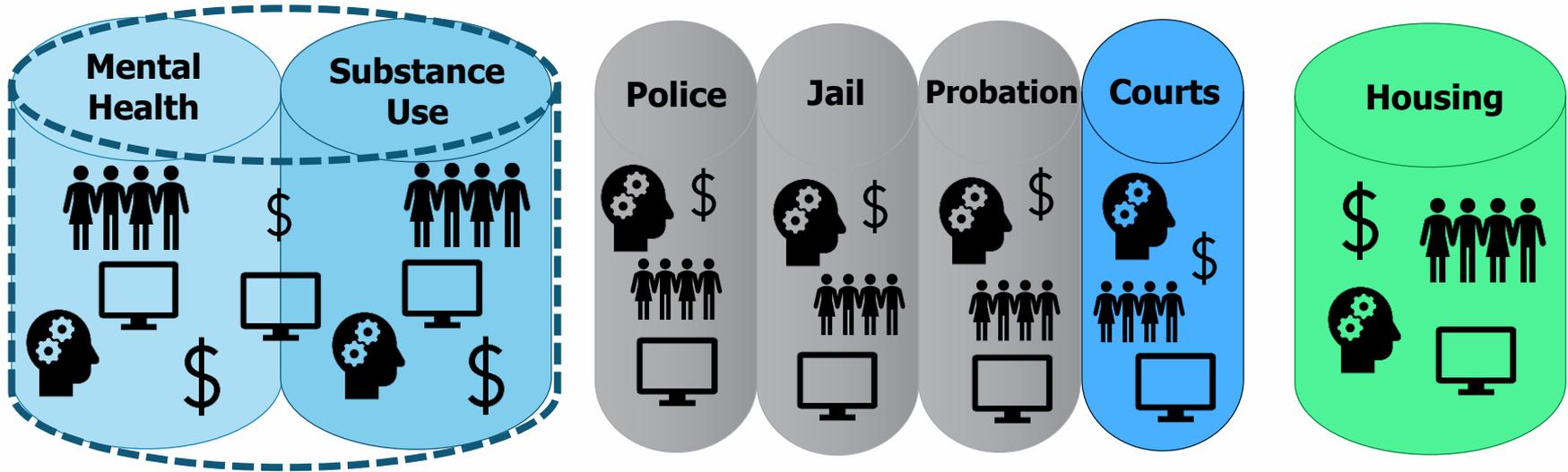
5

Have we prioritized policy, practice, and funding improvements?

6

Do we track progress?

Leadership to Overcome Siloes



Reducing Inconsistency: Shared Definitions, Screening, Assessment, Data Collection



Definition of SMI:

Local shared definition

SCREEN

-  **At booking**
-  **Brief Jail Mental Health Screen (validated)**
-  **Corrections officers**
-  **Funded by county jail**

-  **Owner: County Jail**
- Access: All jail staff**
- Reports/Query: Both**

ASSESS

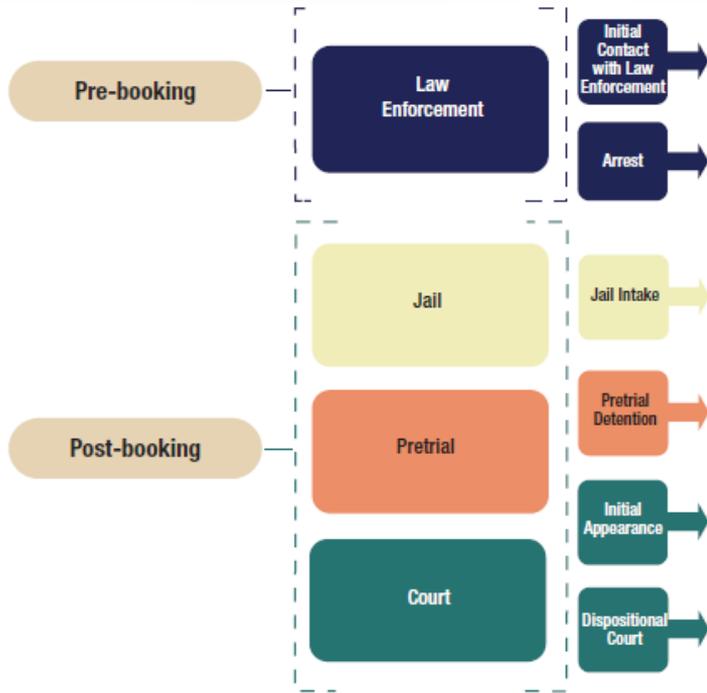
-  **< 72 hours**
-  **County-developed mental health assessment**
-  **Jail behavioral health provider**
-  **Re-assess < 14 days**

-  **Owner: Contractor**
- Access: Mental health professionals**
- Reports/Query: Query only**

Comprehensive Process Analysis and Service Inventory

-  System-wide process review 
-  Inventory of services and programming 
-  Identified system gaps and challenges 
 -  Process problems
 -  Capacity needs
 -  Population projections
-  Identified evidence-based practices 

Diversion: An Off-Ramp from the Criminal Justice System to the Community

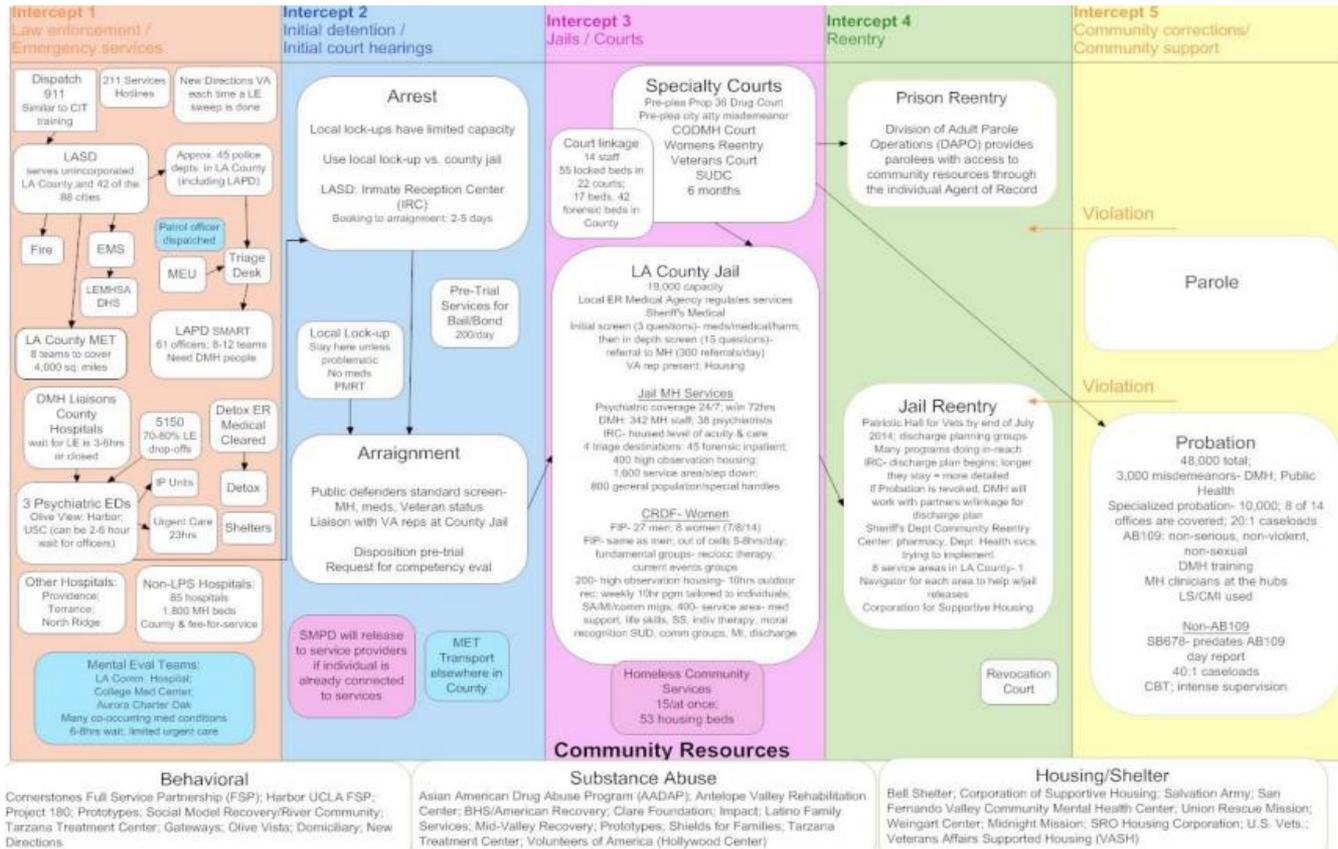


This Photo by Unknown Author is licensed under [CC BY-NC-ND](https://creativecommons.org/licenses/by-nc-nd/4.0/)

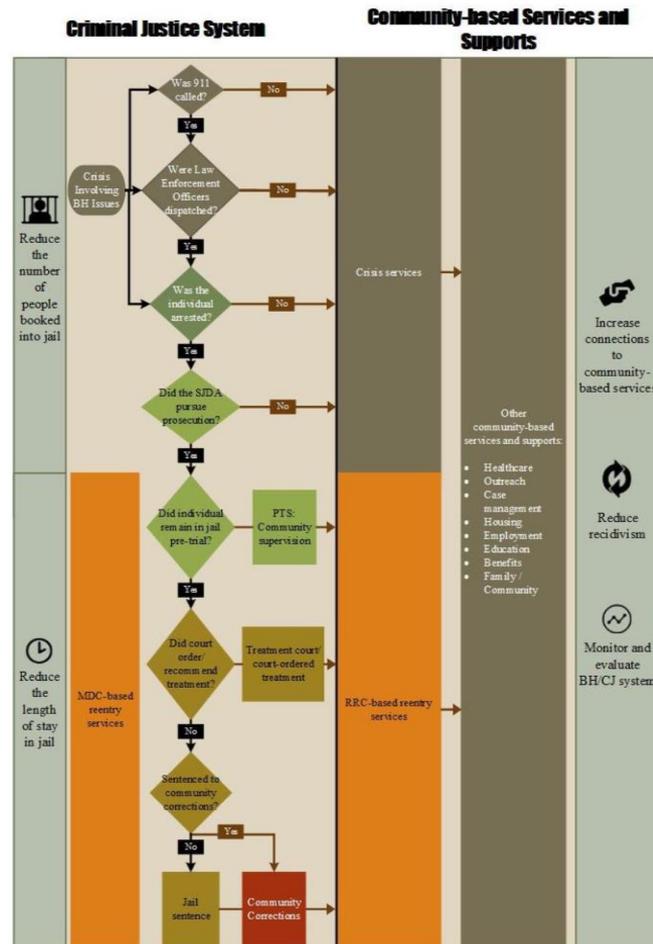


Sheila Tillman, Sarah Wurzburg, and Hallie Fader-Towe, *Behavioral Health Diversion Interventions: Moving from Individual Programs to a Systems-Wide Strategy* (New York: CSG Justice Center, 2019), <https://csgjusticecenter.org/mental-health/publications/behavioral-health-diversion-interventions-moving-from-individual-programs-to-a-systems-wide-strategy/>.

Sequential Intercept Map: LA County, CA (2014)



Bernalillo County Process Map



Judiciary Behavioral Health Projects

- Sequential Intercept Mapping for Taos County – February 2022
- Sequential Intercept Mapping for Union & Colfax County – March 2022
- Justice and Mental Health Collaboration Program – Pilot Projects
- New Mexico Supreme Court Commission on Mental Health and Competency – April 2022
- States Supporting Familiar Faces Initiative – July 2022
- Improving the Court and Community Response to Those with Mental Illness in New Mexico Summit – October 2022

For more information on Judiciary Behavioral Health projects, please contact **Scott J. Patterson**, **Statewide Behavioral Health Manager**, NM Administrative Office of the Courts at aocsjp@nmcourts.gov.

Justice and Mental Health Collaboration Program Administrative Office of the Courts Pilot Projects

Law Enforcement Crisis Intervention and Mental Health Training and Support – Grant and Roosevelt Counties

Mental Health Treatment Court – Eighth Judicial District Court, Raton

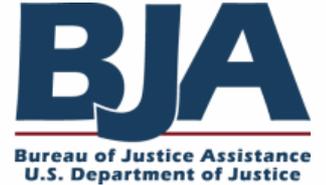
Navigation Services for Individuals with Justice System Involvement and Mental Health Challenges – Hidalgo, Lincoln, and Otero Counties

Service Connection for Individuals at Risk for Inclusion in **Missing & Murdered Indigenous Women** – Bernalillo County

Telehealth Screening and Assessment for Individuals Experiencing a Mental Health Crisis and **Law Enforcement Contact** – Sierra County

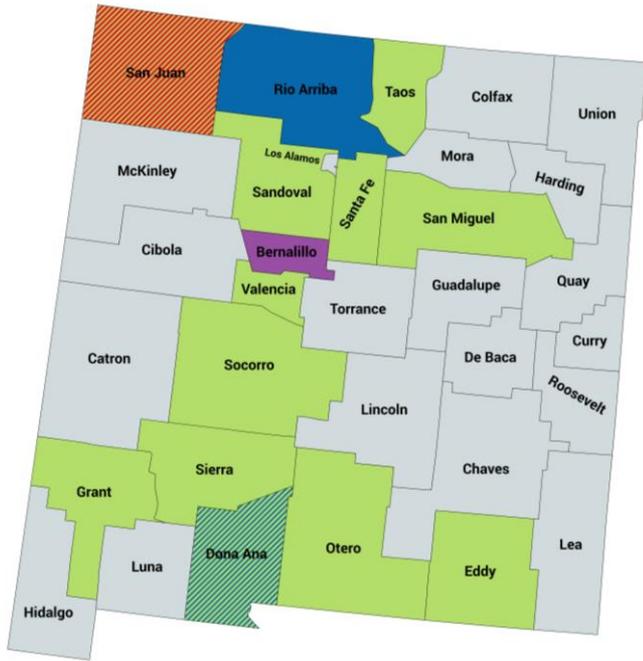
Cross System Stakeholder **Rural Mental Health Training** utilizing ECHO Model – Raton

Housing and Transportation Service Connection for Individuals Exiting Detention – Sandoval County



Justice and Mental Health
Collaboration Program (JMHP)

Builds on County-Level Work in NM and Nationally



- Stepping Up
- Stepping Up + Familiar Faces Initiative
- Familiar Faces Initiative
- Stepping Up + Safety and Justice Challenge
- All three

THE
STEPPINGUP
INITIATIVE



SAFETY+JUSTICE
CHALLENGE

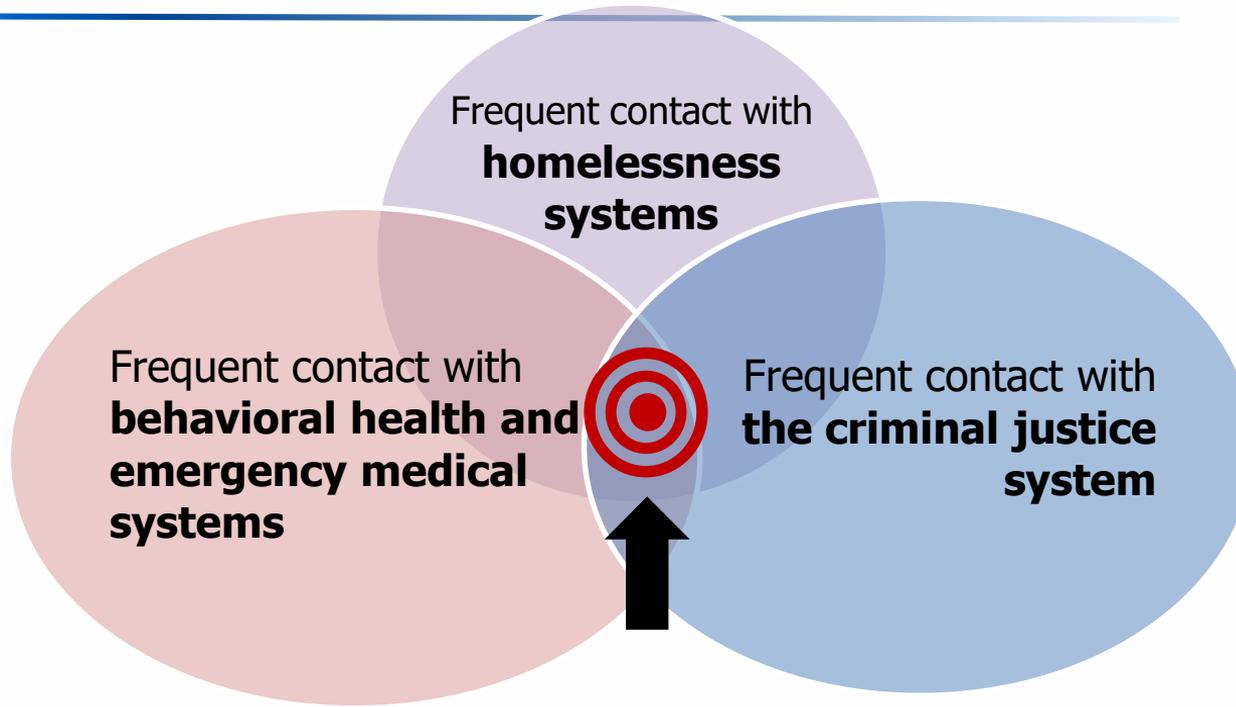
Supported by the John D. and Catherine T. MacArthur Foundation



Familiar Faces Initiative
Improving Outcomes through Coordinated Health & Justice Systems

**Justice and Mental Health
Collaboration Program (JMHC)**

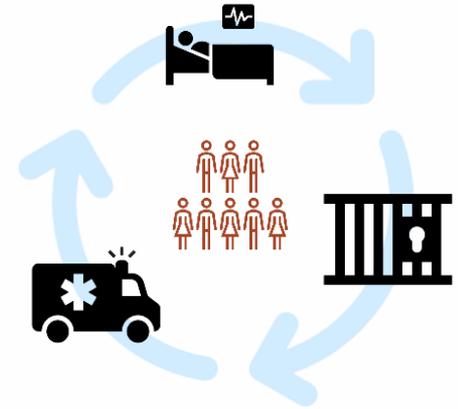
“Familiar Faces”



Small Group of People, High Volume of Contact with Health and Justice Systems

Bernalillo County's 2020 priority population of 216 people:

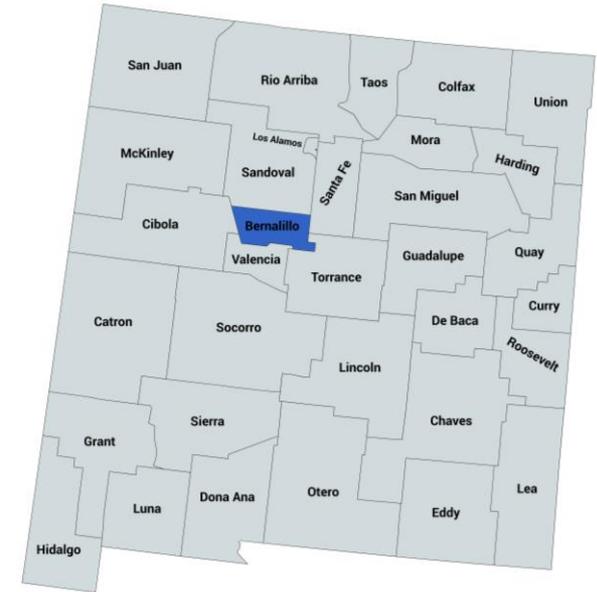
- **69% had been assigned to the MDC psychiatric unit** in the previous 18 months. **30% of those were designated as having a mental illness or suicidal.**
- **92% had been to the Emergency Department (ED) more than once in the previous 18 months**, with one person going 228 times in that period.
- **The 216 people in the priority population accounted for 4,657 visits to hospital EDs across the state** between February 2019 and August 2020.
- 203 people had appeared on six or more priority population lists; **20 people had been on every list.**



Bernalillo County, "High Utilizer List Facts for CSG." Email to Mark Stovell. September 2020.

Bernalillo County's Familiar Faces Work

- **Created a priority population tool** to identify priority population and pair them with intensive case management.
- Priority population includes people with multiple jail bookings within the past 18 months *and* at least one visit to the CARE campus' detox or public inebriate program within the past 3 months.
- Recently developed a **cloud-based, HIPAA-compliant** system to house its priority population list, enabling data sharing across agencies and systems.
- **PERSISTENT CHALLENGE:** Insufficient resources to provide appropriate interventions for priority population.



Familiar Faces Strategies in Rural Areas

- **Doña Ana County** has developed a release of information to allow information exchange between Assisted Outpatient Treatment (AOT) and Law Enforced Assisted Diversion (LEAD) programs
- **Otero County** has a shared electronic records system among law enforcement and the detention center that documents Crisis Intervention Team (CIT) referrals.
- Expanding the **Alamogordo** mobile crisis program countywide will expand data collection capacity to include HIPAA-protected mental health information.

A State and Local Approach



Familiar Faces Initiative

Improving Outcomes through Coordinated Health & Justice Systems



**Arnold
Ventures**



Justice Center

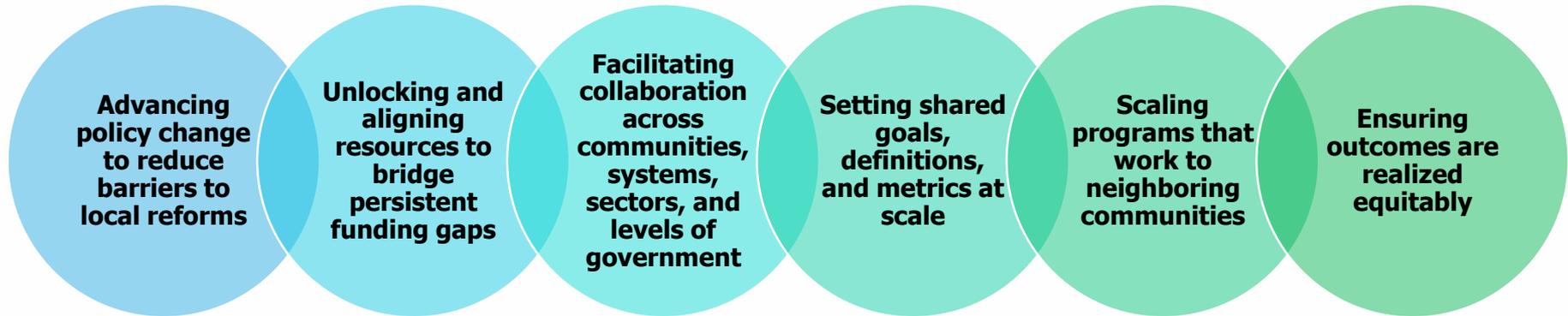
THE COUNCIL OF STATE GOVERNMENTS

What We've Learned

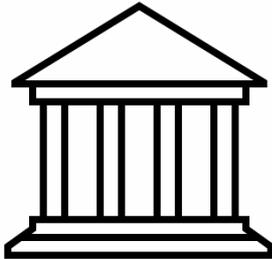
- Keeping people with behavioral health needs out of the system **as early as possible yields better outcomes and use of resources.**
- **No one system or agency can solve the problem alone.** Public health and public safety must align funding, staff, and priorities to meet the challenge.
- **Local problems need local solutions.** There is no one-size-fits-all approach, so flexibility is needed to adequately meet local needs.
- **States are central to accelerating progress at the local level** and enabling the shift from stand-alone programs to systems transformation.
- To take up this mantle effectively, **state policymakers need locally informed guidance** on where and how to target their actions to meet a wide range of community needs.

How States Support Local Efforts

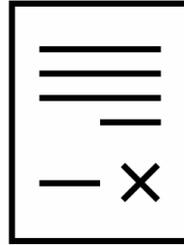
A coordinated statewide strategy can advance local efforts by:



Coordinated Responses Across Branches



Legislation
Budgetary action

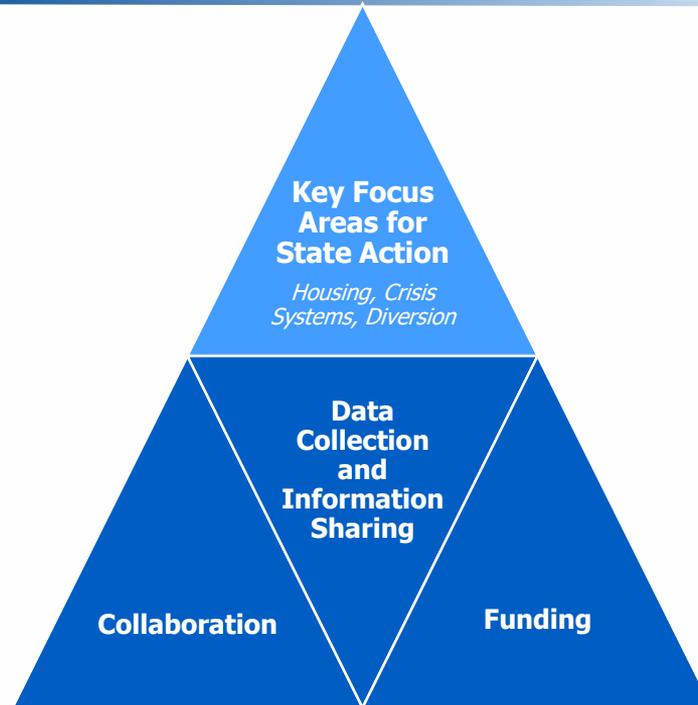


Administrative action
Executive orders



Judicial champions
Rules of Court

Strengthening the Foundations for Coordinated Cross-system Efforts



States Supporting Familiar Faces

Project Overview

States Supporting Familiar Faces

This project will position two states to enact policy changes that build local capacity to improve responses to high utilization by



Using data to identify and better serve this population;



Promoting the use of pre-arrest diversion; and



Building and scaling community-based behavioral health services, crisis systems, and housing.

State Policy Examples: Familiar Faces



Using data to identify and serve population

- **Michigan:** Care Connect 360 facilitates care coordination across programs and payment systems. Data matching informs state policy and funding decisions.



Promoting pre-arrest diversion

- **Arkansas:** Criminal Justice Efficiency and Safety Act funded CIT and CSUs to promote pre-arrest diversion for people in crisis.



Building and scaling community-based care

- **Oregon:** Justice Reinvestment Initiative legislation created a new permanent supportive housing benefit for familiar faces population.

States Supporting Familiar Faces: At-a-Glance

- Bring together cross-system leadership group
- Review local “familiar faces” strategies, as well as innovative and best practices nationally, to
 - Inform state policy recommendations and
 - Provide peer-to-peer learning opportunities for counties
- Support implementation of at least two adopted policy recommendations

Three-Branch Approach

Legislature:

Coordination
with LHHS
Committee

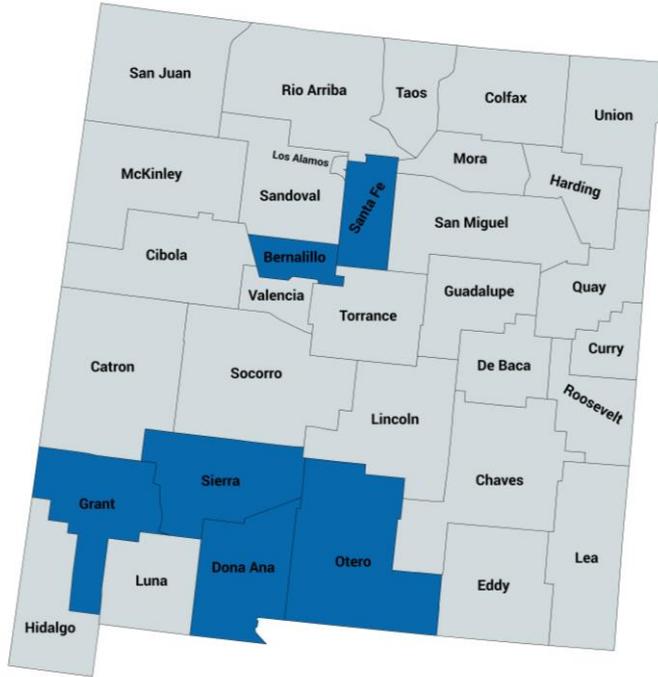
Task Force Home:

New Mexico
Supreme Court
Commission on
Mental Health
and Competency

Executive:

New Mexico
Behavioral
Health
Collaborative

County Engagement to Date



- Bernalillo County
- Doña Ana County
- Grant County
- Otero County
- Santa Fe County
- Sierra County

2022 Activities and Outputs

Winter/Spring

- Initial stakeholder engagement
- Request for SSFF technical assistance from state leaders

Summer

- Estimated 3 task force meetings
 - Review local lessons learned from NM counties.
 - Present initial findings and draft policy recommendations.
 - Deliver final presentations and discuss policy recommendations.
- Local engagement and peer learning sessions
- Introduction of project/findings to relevant additional stakeholders, including legislative committees and NM counties conference

Fall

- Ongoing stakeholder engagement to refine recommendations and position them for adoption
- Report with policy recommendations

Opportunities in NM

Seeding ideas for impactful policy action

Opportunities for State Action in New Mexico

- Collaboration
- Data collection and information sharing
 - Issue common definitions
 - Promote collection of key metrics
- Behavioral health workforce
- Housing
- Rural and frontier access to care
- Pretrial diversion strategies
- Connections to care and supports upon reentry

POLICY AREA: Strengthening Collaboration

Communities are facing public health and safety challenges no one system has the resources, ability, or responsibility to solve alone.

Successful change hinges on **intentional and meaningful collaboration** on many levels, including

- **Between states and localities;**
- **Across branches of government;**
- **Within and across systems;**
- **Across sectors (public and private); and**
- **With community members.**

Support local collaboration.

Local cross-system collaboration is critical yet challenging to actualize without state support.

States can fund the creation of local councils and support operations with guidance and training.

- **Strengthen county and regional planning.**
- Conduct **local systems assessments** (i.e., SIM Mapping) to identify and bridge gaps.
- Serve as **local laboratories for innovation.**
- Align and secure additional **funding.**
- Formalize and facilitate **state-local coordination.**



Pennsylvania CJABS, State TA Center

POLICY AREA: Data Collection and Info Sharing

Current data on behavioral health needs of people in the criminal justice system are often disjointed. Many communities lack needed infrastructure to collect, share, and analyze data.

Effective state policymaking hinges on understanding the following:

- **The nature and extent of the challenges**
- **What strategies can best address them**
- **How well these strategies are working, including if outcomes are being realized equitably**
- **What services and supports are available locally**

State Policy Strategy:

Set, understand, and use common definitions.

States can play a vital role in setting and promoting use of shared definitions across agencies and levels of government.

Important terms: Severe mental illness, substance use disorder, homelessness, recidivism, and high utilization

Common definitions **consistently used** by state and local entities can do the following:

- Identify a **common population** for cross-agency efforts.
- Ensure that **eligibility for services is consistent** across agencies.
- Establish a **common metric for tracking outcomes** of policy and practice change.



Washington, DC, defines homelessness in statute.

State Policy Strategy:

Promote collection and reporting of key metrics.

Providing specific metrics and protocols for tracking metrics at the state level can

- Ensure **consistency and accuracy** in collecting data;
- Establish **baseline** measures and help **set reduction targets** against which progress can be measured;
- Provide vital information to local policymakers on **whether strategies and investments are achieving intended outcomes**; and
- Supply **aggregate data** to inform state-level policies, determine capacity needs, and identify efficiencies through shared resources.



Florida passed legislation requiring all counties to collect key metrics pertaining to courts, jails, and prisons.

Key Policy Areas to Support Familiar Faces



**Growing a
culturally
responsive
behavioral
health
workforce**



**Increasing the
supply of
permanent
housing for
familiar faces**



**Expanding
community-
based care in
rural and
frontier areas**



**Scaling
effective
pretrial
diversion &
reentry
strategies**

Discussion

Planning for the legislative session

Discussion

- Where do you see alignment with existing priorities?
- What policy or funding strategies to strengthen local capacity to improve outcomes for familiar faces could be achievable in the coming year?
- How can States Supporting Familiar Faces help bolster and align existing efforts?
- What information is still needed?

Thank You!

Join our distribution list to receive updates and announcements:

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

For more information, please contact Amy Button
at abutton@csg.org or Hallie Fader-Towe at hfader@csg.org

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.

© 2022 The Council of State Governments Justice Center