



**Annual Report on the
Criminal Justice, Mental Health, and
Substance Abuse Reinvestment Grant
Program Act**

**Submitted by
The Florida Substance Abuse and Mental Health Corporation
and
The Criminal Justice, Mental Health, and Substance Abuse
Technical Assistance Center**

January 1, 2010

Introduction

The Florida Legislature created a valuable tool for communities across the state when it passed the Florida's Criminal Justice, Mental Health and Substance Abuse Reinvestment Grant Act. The 2007 legislation laid the groundwork for community leaders to plan, create and expand innovative services to shift care of offenders with mental illnesses and/or co-occurring substance use disorders from the most expensive, deep end treatment settings to community-based programs. The grants have enabled counties to supplement community mental health and substance abuse services that are stretched too thin to address the needs these individuals.

We know that public safety can best be served by appropriately diverting those offenders who have mental health care needs and who have not committed violent crimes into programs that help them manage and stabilize their mental illnesses and, where necessary, address their addictions. During the 2010 Legislative Session, the Legislature should approve \$1 million for planning grants for the coming fiscal year and, in the future, consider expanding the Reinvestment Grant so that every Florida county has access to this innovative program. By combining the infrastructure and services created by the Reinvestment Grants, drug courts and the proposed Community Mental Health and Substance Abuse Treatment and Crime Reduction Act, Florida will be on its way to developing a system-wide, integrated treatment system that can be a model for reform in other states. To achieve this goal, Florida must continue to support best practices and initiatives to divert people from incarceration to treatment when appropriate, identify and treat people while incarcerated and provide comprehensive re-entry planning to reduce recidivism and increase public safety. It is also essential that Florida fund community mental health and substance abuse treatment providers to develop sufficient capacity to meet the treatment and support needs of individuals diverted or released from incarceration.

The Reinvestment Grant Act created two types of grants — planning and implementation — to help communities develop and/or expand treatment alternatives to jails, prisons and state forensic hospitals. Grants are awarded competitively and must be matched by the counties, thereby maximizing available resources. The first grants were awarded to 23 counties in 2008.

Grants are creating and expanding treatment alternatives

Of the 23 grants awarded, 11 were implementation grants totaling \$2.8 million in state funding. With the addition of the required local match, a total of \$21.6 million in state and county dollars will be made available over three-year grant period. By statute, these grants may be used to fund initiatives including, but not limited to, mental health courts; diversion programs; alternative prosecution and sentencing programs; crisis intervention teams; treatment accountability services; specialized training for criminal justice, juvenile justice, and treatment services professionals; housing, transitional housing and employment services; and re-entry services focused on mental health and substance abuse services and supports. Some of the counties receiving implementation grants have used the funding to expand existing programs. Others have used the funds to create new programs from the menu in the authorizing legislation.

Alachua County

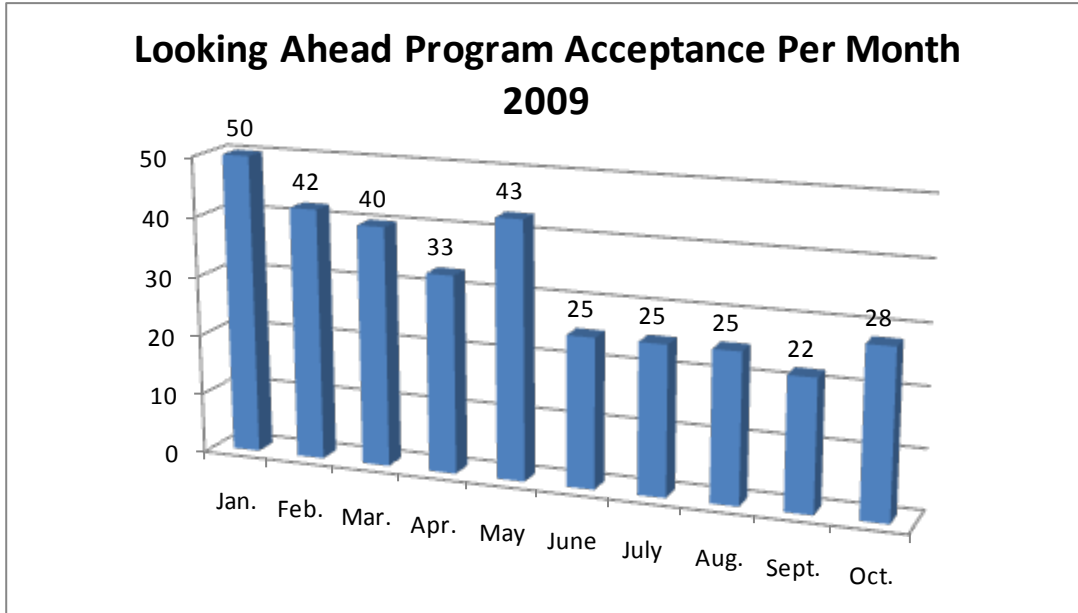
Alachua County has created a forensic diversion team with its grant funding. Individuals in jail are screened for potential eligibility for the team's services. As of the writing of this report, 708 referrals had been received, of which 273 were accepted/diverted since the inception of the program in July 2008. The program serves difficult-to-treat individuals who have serious mental illnesses or substance use disorders or both, coupled with a history of recidivism. The team has adopted features of the Assertive Community Treatment (ACT) team model, emphasizing engaging clients, an integrated team approach, and intensive service delivery, including on-call staff. The Criminal Justice, Mental Health, and Substance Abuse Technical Assistance (TA) Center has developed an electronic database that enables tracking of criminal justice and treatment outcomes for individuals who are screened for possible admission to the forensic team. To date, there have been 2,450 referrals and 871 screenings entered into the system. In addition, the database allows for both incarceration and criminal history to be tracked as well as evidence-based instruments such as the GAINS checklist.

Broward County

Broward County is using its grant funds to divert individuals with mental health or co-occurring substance use disorders from jails by implementing the Freedom Project, a pre-arrest community based jail diversion model. Law enforcement officers may drop off individuals at risk of arrest because of mental health disorders at the project facility 24 hours a day. Services include peer support, counseling, case management and evaluation for further treatment interventions as deemed necessary. A new centralized location for service, the Freedom House, opened on October 6, 2009. This new location offers a one-stop, stand-alone facility for consolidated services. On average, it takes less than 15 minutes for an officer to complete delivery of an offender to the Freedom House. To date, 75% of offenders have not been rearrested as of their one-month and three-month follow up appointments.

Hillsborough County

Hillsborough County is using its award to expand Looking Ahead, an existing Forensic Intensive Case Management diversion program created in 2007. This program is designed specifically to prevent forensic commitments to state hospital beds. Clients are ex-offenders over the age of 18 who have a mental health diagnosis. In addition, both male and female clients are served, as well as individuals with a dual diagnosis of mental health and substance use disorders. The program is voluntary and offers varying levels of services and assistance. A voucher system is used to provide quick access to treatment, medication and tangible goods, e.g., eyeglasses, which will enhance recovery. As of the writing of this report, Looking Ahead had accepted 333 individuals in the program. The program has also provided Crisis Intervention Training (CIT) for 143 law enforcement officers as of September 30, 2009.

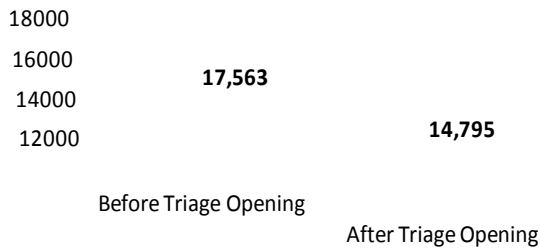


The TA Center conducted a Sequential Intercept Mapping workshop in February 2009 to identify and examine the path taken by an individual in crisis who comes in contact with the criminal justice system in Hillsborough County. A similar workshop is also planned for December to map the path through the juvenile justice system.

Lee County

Lee County has used its grant funding to create the Triage Center/Low Demand shelter which began operations on April 28, 2008, only three months after the county was notified of the grant award. The Center provides an alternative to jail for individuals who may have a mental illness. Initially, limited funding allowed for nursing staff to receive clients only between 4 p.m. and 11 p.m., but in July 2009, hours were extended from 2 p.m. to 11:30 p.m. Between April 28, 2008 and September 30, 2009, the Center received 474 individuals for assessment. During the same period, 637 duplicated individuals used the shelter, with an average length of stay of 12 days. The county is tracking outcome data on individuals referred to the shelter, as well as processing data on the amount of time law enforcement officers spend at the Center during a referral. Thus far, 86.75% of officers reported spending less than five minutes at the Center. This expedient transfer of responsibility to the Center permits officers to return to their policing duties more quickly. Another benefit to the community is the reduction in jail days served. As of the writing of this report, 66% of individuals at the Triage Center had a prior arrest in Lee County. The chart below reflects a 16% reduction in jails days for this population—resulting in a cost savings of \$175,159.04. Staff of the CJMHS Technical Assistance Center has visited the county and the Triage Center to review data systems and provide analytical consultation. Lee County plans to partner with the TA Center to conduct cost avoidance studies and to develop methodology to measure recidivism.

Lee County
Triage Clients with Local Arrest History Jail Days
18 Months Pre and Post Triage Opening



Leon County

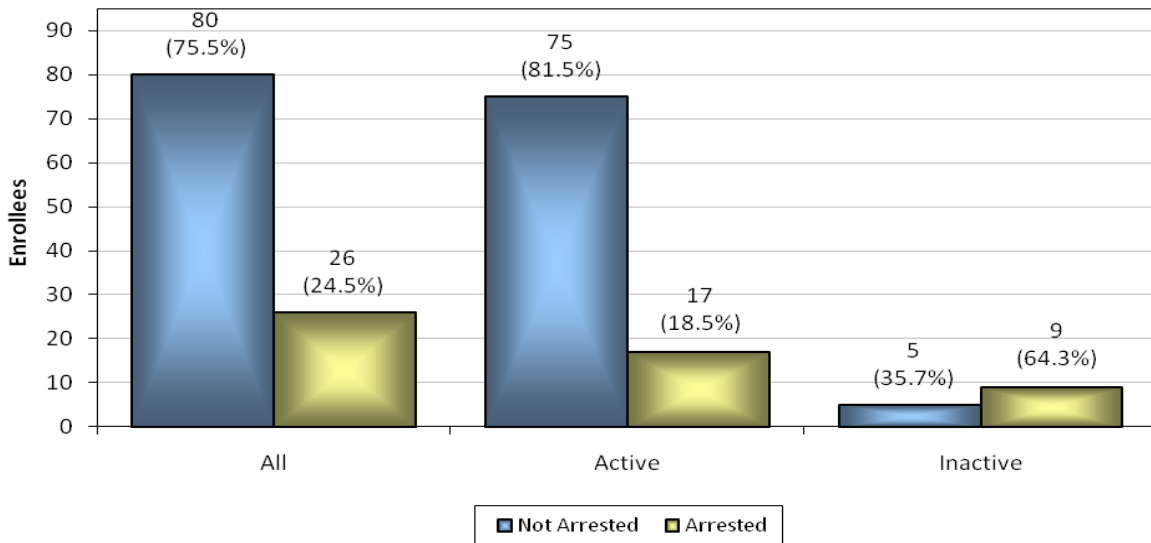
Leon County has used its implementation grant to expand or create six programs. These include a mental health pretrial release program, mental health probation for both county and state probation, a misdemeanor and a felony mental health court, community competency restoration and enhancement of Crisis Intervention Team (CIT) training. The main objective of these programs individually and in the aggregate is to improve access to treatment for defendants with mental illnesses and dispose of their cases in a timely manner, while helping to assure public safety. The mental health pretrial release program allows the court the option to release an offender into the community under the supervision of a trained specialist. The specialist monitors the defendant’s compliance with court sanctions and provides case management services. As of September 30, 2009, the program had an active caseload of 27 clients— two more than what is considered a full caseload. From April 2009 through September 2009, there have been 19 successful graduates, resulting in a 56% success rate. The mental health probation program serves both felony and misdemeanor mental health courts. Through the development and implementation of mental health probation plans, defendants with mental illnesses are linked to community services. The program serves an average of 23 clients per month. The misdemeanor and felony mental health courts have also met with success. One example is a new partnership with the Center of Independent Living of North Florida. Clients can now be referred to Vocational Rehabilitation for assistance with job skills training and attaining employment. In addition, the court has also been referring defendants to Florida Therapy Services for continued care. The court faces several obstacles while creating and implementing mental health plans for each defendant. The lack of affordable housing is one such hurdle. However, the mental health team has worked diligently to match clients with appropriate housing. The community competency restoration program is another asset of the Leon County mental health program. It allows defendants with mental illness who are incompetent to proceed but can safely be

monitored in the community to access wraparound services. Examples of services provided by this program include: computer training, assistance with reinstatement of benefits, employment referrals, referrals to vocational rehabilitation and access to mental services and medication. The mental health pretrial release specialist is a mental health professional who not only helps to ensure adherence to court sanctions, but also assists the defendant in obtaining or maintaining stability in the community. Crisis Intervention Team (CIT) training continues to expand throughout Leon County. As of the writing of this report, 27 dispatchers have completed training and seventeen CIT classes had been conducted in county.

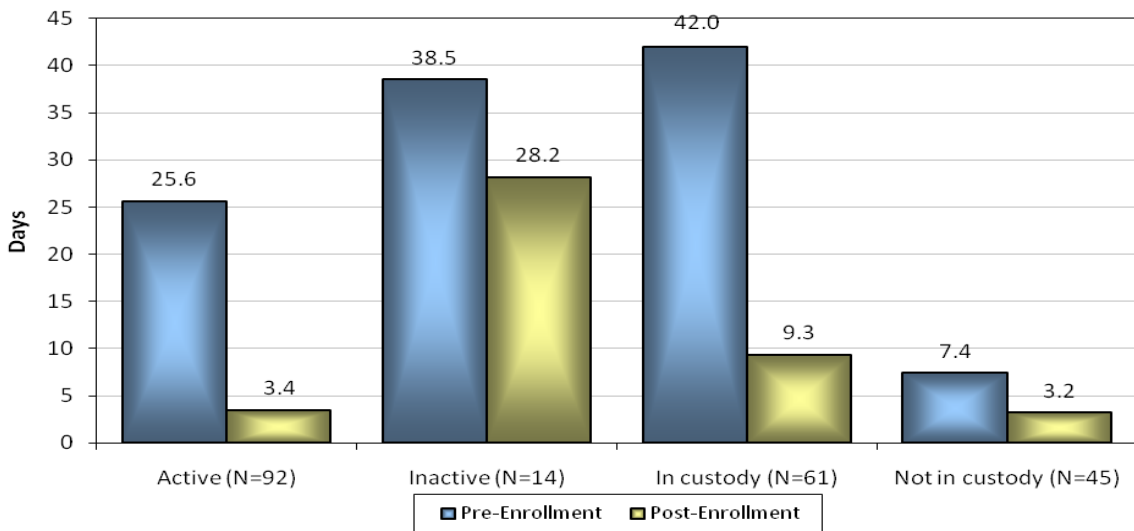
Miami-Dade

Miami-Dade continues to use their funding to expand the Criminal Mental Health Project, a court-based program designed to divert individuals with serious mental illnesses into treatment. The project has four components: the Felony Jail Diversion Program, the Misdemeanor Jail Diversion Program, Forensic Diversion and Crisis Intervention Team (CIT) training. Several goals were established and realized this calendar year. These include protecting public safety, diverting and treating people at risk of entering the criminal justice system and averting costs for the criminal justice system. The diagrams shown below reflect clients served in the Felony Jail Diversion Program (FJDP) between October 2008 and September 2009. Of the 106 participants actively enrolled in the program, 80 or 75% were not re-arrested. Only five of those arrested were charged with new offenses following enrollment in FJDP. The remaining 21 program participants were taken into custody post-enrollment were re-arrested on technical violations for failing to comply with program requirements. Average days in jail for FJDP participants were also significantly decreased. Also noteworthy is the Miami-Dade project's effort to assist clients in applying for entitlement benefits that will support their recovery and transition back to the community. A total of 40 applications were submitted using SOAR (SSI/SSDI, Outreach, Access and Recovery) procedures. Of those 93% were approved on initial submission, compared to the national average of only 37% acceptance.

Arrest Status Post-Enrollment in Miami-Dade Felonv Jail Diversion Program



Average Days in Jail Pre and Post Enrollment in FJDP

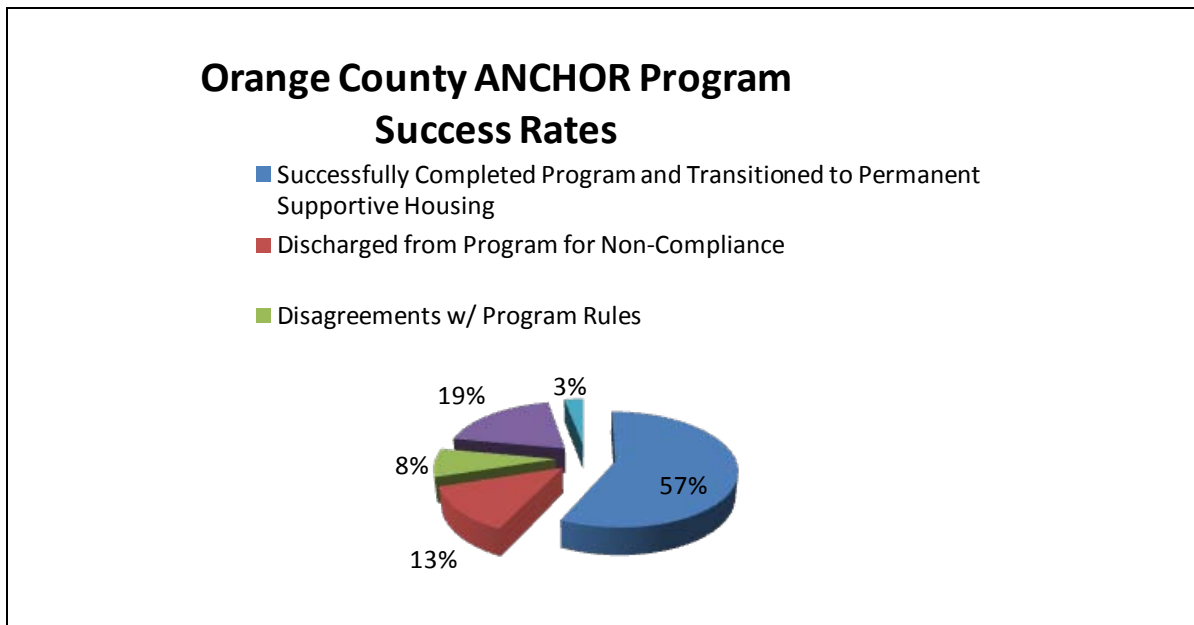


Nassau County

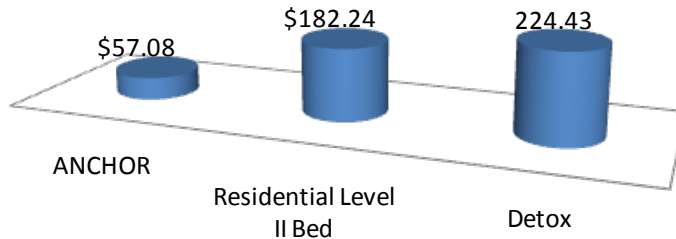
Nassau County has used its grant to expand a preexisting mental health court. The court has jurisdiction over misdemeanor offenses and, as a result of grant funding has been able to include offenders charged with third degree non-violent felonies. Nassau court officials are currently pursuing opportunities to also include juvenile offenders and civil respondents. The court continues to seek expansion of its caseload, which to date consists of 20 cases. The mental health court has a director who screens and reviews all individuals entering the Nassau County jail for possible referral to the mental health court. The screening has the collateral effect of expanding the amount of information available to the jail and the court system regarding potential mental illness and substance abuse issues. Nassau County has partnered with the TA Center to manage their mental screen and referral data. The TA Center has created a web-based data management system that allows the in-jail mental health court director to digitally store and analyze screening forms, referrals and psychological evaluations. To date, 1,264 people have been screened for eligibility to mental health court.

Orange County

Orange County is using grant funding to expand its existing Central Receiving Center (CRC), a triage center for people with acute mental illness or substance use disorders referred by law enforcement or emergency room staff. The CRC provides assessment and linkage to treatment services as an alternative to arrest or involuntary civil commitment. The grant has funded creation of the ANCHOR program which provides transitional housing and case management services. It includes a continuing care system that provides medical services, access to permanent housing, medication management, help in accessing entitlements, support groups, legal services and aftercare treatment. The program has served 141 homeless individuals with substance abuse and/or mental illness from October 1, 2008 and September 30, 2009. Success rates are described in the following chart. At an average cost of \$57.08 per bed, the program is a less costly alternative than other community treatment options.



Orange County Average Cost of a Residential Treatment Bed



Pinellas County

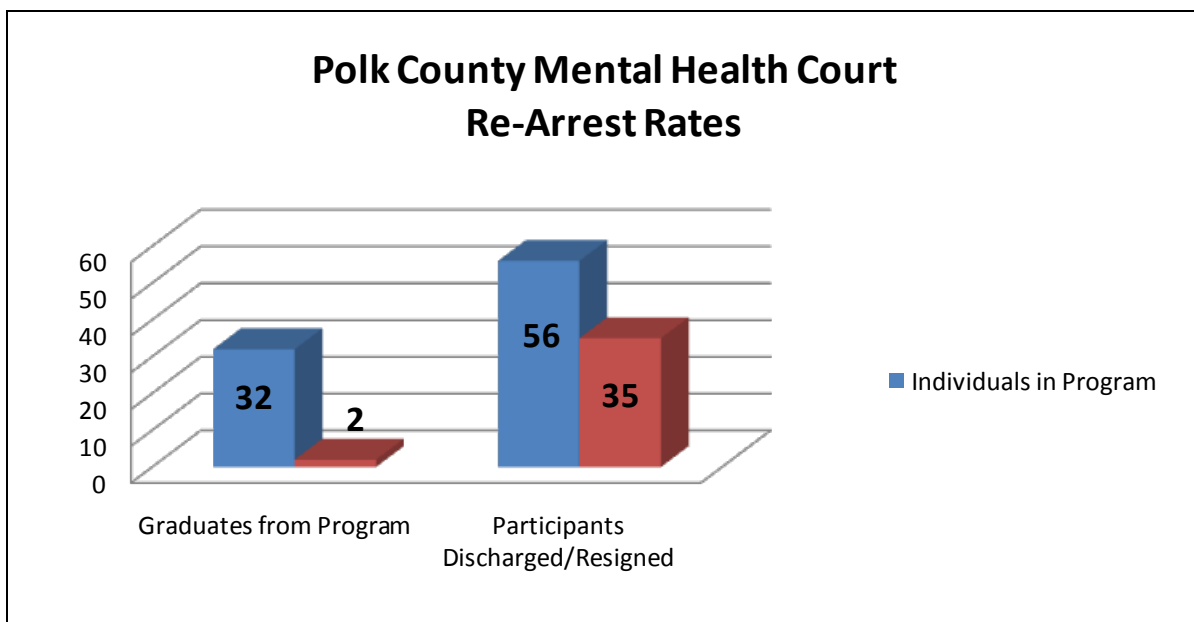
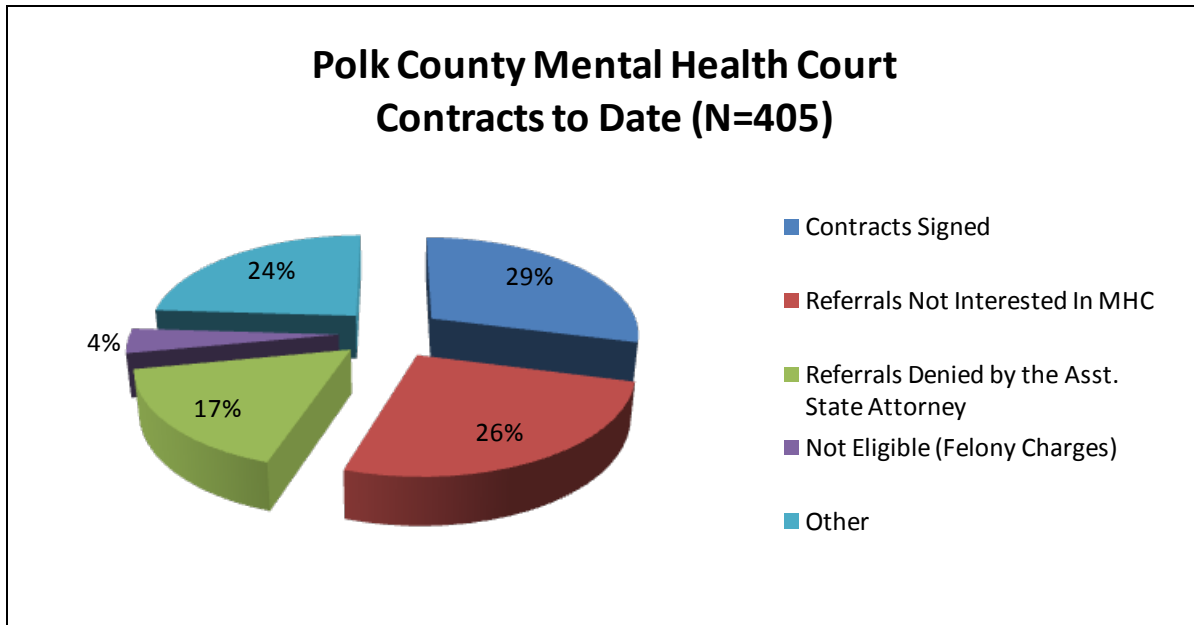
Pinellas County used its grant to expand the existing Pinellas County Mentally Ill Jail Diversion Program. Initially, funds were used to address a 30-person waiting list for this program. In 2009, the award allowed for Pinellas County to continue to divert individuals from the county jail and/or state mental institutions and provide them with treatment. In addition to their two Master’s level caseworkers, they have hired an additional Master’s level caseworker and a staff assistant to provide liaison services and transportation. The county has maintained data on the diversion program since 2004, and reports an overall 91% reduction in arrests among individuals who have been diverted into treatment compared to their arrests prior to entry into the program.

Pinellas County Jail Diversion Outcomes 2004-2008						
Year	Number of Clients	Arrests	Arrests After Jail Diversion	% Decrease in Arrests	% Non-Compliant	Deceased Clients
2004	199	1,009	203	79%	25%	6
2005	601	4,296	832	80%	13%	8
2006	496	3,585	320	91%	12%	5
2007	602	4,891	179	96%	7%	3
2008	459	3,336	88	98%	17%	3
Total (Avg.)	2,357	17,117	1,622	91%	(15%)	25

Polk County

Polk County has used its implementation grant to expand the capacity of a misdemeanor Mental Health Court, Crisis Response Team (CRT), and Forensic Intensive Case Management (FICM). Currently all three are fully staffed and operational. The Mental Health Court has had 405 referrals since its inception in October 2007. Of these, 118 have participated in the program and 32 have graduated. As of the writing of this report, there are 30 active clients. The CRT has also

had success, reporting 1,486 attempts to contact potential clients and 641 clients served. Their efforts have relieved the burden of follow-up by the Sheriff's office. FICM has a caseload of 45; of those, 39 are receiving Competency Restoration Training. To date, case managers have ensured legal advocacy for 41 individuals and had two individuals graduate from the program. The TA Center has partnered with the Polk County Mental Health Court to create a database to manage the expanding caseload. It is currently in the development phase and will be operational in early 2010. In addition, the county has consulted with the TA Center regarding various evidence based practices. The following charts provide details about contacts made by the court and re-arrest rates of participants.



Saint Lucie County

Saint Lucie County is using its implementation grant to expand its Mental Health Court. The Court's case management staff has been very successful in helping clients obtain entitlements, housing, and both mental health and substance abuse services. They also provide aftercare services and follow up with all program graduates monthly. The county has an excellent data management system that permits tracking of client outcomes. According to their records, only 6.88% of mental health court graduates have been rearrested. This may be attributed to the availability of wraparound services as well as to their use of peer specialists. Saint Lucie has also increased CIT training as part of its efforts to divert people with mental disorders from the criminal justice system. As of the writing of this report, the county had trained 12 deputies and officers and had four additional trainings scheduled for remainder of the calendar year.

The Technical Assistance Center

The Criminal Justice, Mental Health and Substance Abuse Technical Assistance (TA) Center at the Florida Mental Health Institute (FMHI) has several statutory responsibilities. Included are assisting counties in projecting and monitoring the effect of a grant-funded intervention on the criminal justice system and jail, and acting as a clearinghouse for disseminating information on best practices and other information relevant to criminal justice, juvenile justice, mental health and substance abuse.

The TA Center has created a website (www.floridatac.com) that serves as a clearinghouse for information on best practices, and offers other resources for practitioners and policymakers in the criminal justice and treatment systems. The website also displays data profiles for each of Florida's counties. These data profiles integrate the county's arrested population (drawn from statewide Florida Department of Law Enforcement arrest data) with mental health and substance abuse services found in statewide Medicaid claims data, the statewide Integrated Data System maintained by the Florida Department of Children and Families, and a statewide Baker Act data system maintained by FMHI. As a result, counties have information about the number of individuals who have been arrested and who have used mental health and/or substance abuse services in the past, as reflected in state data bases.

In an attempt to further fulfill the counties' need for cross-agency data, the TA Center has secured five years of data on individuals who were served by programs funded by the Department of Juvenile Justice. Center staff has begun analyses of these data, and intend to integrate them with Medicaid, Baker Act and IDS data, similar to the analyses done with adult data. The website has been redesigned to incorporate the Juvenile Justice data. The revised site is expected to be launched by the end of the calendar year. Additionally, the Center partnered with the Council of State Governments to add a new search tool that gives visitors the ability to search both of our sites for materials, thus expanding access to resources.

The TA Center has created electronic databases for Alachua and Nassau Counties for use in tracking client-specific outcomes for individuals served by each county's grant-funded programs. Databases are currently under development for Polk and Charlotte Counties and should be operational by early 2010. Also in 2009, the TA Center conducted Sequential Intercept Mapping in Sumter and Hillsborough Counties and has a second mapping schedule for Hillsborough's

juvenile system in late December. Because the TA Center used state funding to leverage additional funding from a foundation, these workshops, like all of the TA Center's activities to date, have been cost free to the counties. Finally, the TA Center continues to work closely with the SAMH Corporation, Partners in Crisis and others on various issues related to the Reinvestment Act, as well as other issues relevant to the assessment and treatment of people with mental disorders who are in or are at risk of entering the adult and juvenile justice systems. Center staff participated in the annual Criminal Justice Mental Health and Substance Abuse Grantee conference hosted by the SAMH Corporation on July 16 and 17 in Orlando, presenting on data sharing and housing.

Conclusion

In the absence of adequate intervention and treatment, too many individuals with mental illness are becoming involved in Florida's justice system. The large number of people with mental illnesses cycling through local jails and courts are a public health and safety crisis for many counties. Community mental health and substance abuse services providers are unable to meet the treatment needs of this growing population with existing resources, and local corrections officials have become de facto treatment providers. When the Criminal Justice, Mental Health and Substance Act passed in 2007, lawmakers hoped the grant program it created would stimulate local innovation and state and county partnerships to develop systems of care to divert individuals with mental illnesses and substance use disorders from the criminal justice system. Those hopes have been realized in the first two years of the grant program. The 23 counties that received planning and implementation grants were able to develop strategies for more effective ways to address the growing number of people with mental illnesses and substance abuse disorders involved in the criminal justice system. In this review of the 11 counties with implementation grants, we have shown there are alternative treatment strategies that will improve public safety, help people with mental illnesses succeed in the community, and in the long run, save taxpayers money.