



# Developing Partnerships for System Change in King County, Washington

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Which Way Out? Applying the Sequential Intercept  
Model as a Framework to Decriminalize Mental Illness

November 15, 2007

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Health and Substance Abuse



# Background: King County

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- ❑ 12<sup>th</sup> most populous county in the U.S.
- ❑ 39 cities, with Seattle being the largest
- ❑ Government consists of a County Executive, 9-member County Council, and separately elected officials (sheriff, judges, prosecuting attorney)
- ❑ King County managed jails have an average daily secure population of 2400.



# Background: Where We Started

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- Juvenile Justice Operational Master Plan to reduce use of juvenile detention. Began in 2000
- Adult Justice Operational Master Plan to reduce use of jails. Began in 2000
- Criminal Justice Initiatives to provide treatment alternatives to jail. Began in 2003
- Basic mental health and chemical dependency services chronically underfunded by state and federal government funding sources



# Criminal Justice Initiatives: Vision

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- In King County, offenders with mental illness and/or chemical dependency needs receive a continuum of treatment services that is coordinated, efficient, and effective, and that reduces their rate of re-offense and jail time.



# Criminal Justice Initiatives

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- ❑ \$2 million provided by King County to fund programs
- ❑ Focus on services in custody and linkage to community services upon release
- ❑ Included design of assessment process in jail, cross system training, criminal justice liaisons, linkage to benefits, housing vouchers, methadone treatment, outpatient C.O.D. treatment, and program evaluation



# Criminal Justice Initiatives: Remaining Gaps

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- ❑ Pre-booking diversion programs
- ❑ Accessible and appropriate housing
- ❑ Accessible mental health and chemical dependency treatment systems
- ❑ Prevention programs
- ❑ Capacity to serve more people in existing programs



# Opportunity to Fund System Change

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- The 2005 Washington State Legislature passed legislation allowing counties to impose a 0.1 percent sales tax to be used “solely for the purpose of providing new or expanded chemical dependency or mental health treatment services and for the operation of new or expanded therapeutic court programs”
- In King County, the sales tax would raise \$50 million per year



# First Steps

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- Mental Health and Substance Abuse Community Advisory Boards asked County Executive to implement sales tax to fund services
- Executive directed staff to convene workgroup to identify priority needs and services
- Workgroup with broad representation from county government stakeholders reached agreement on priority needs and services



# Need in King County

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- ❑ Large number of people with mental illness and chemical dependency in jail and hospital emergency services
- ❑ Mentally ill in jail stay longer and cost more to serve
- ❑ Over 8,000 homeless in King County
- ❑ People without Medicaid coverage unable to get needed services
- ❑ Little funding provided for prevention and early intervention
- ❑ More capacity needed for youth and adult therapeutic courts



# Service Improvement Recommendations

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- ❑ Provide crisis intervention training for first responders
- ❑ Establish a crisis diversion facility
- ❑ Expand therapeutic courts
- ❑ Expand accessible and affordable housing options
- ❑ Reduce caseload size in mental health system
- ❑ Increase access to services for people uninsured by Medicaid
- ❑ Increase resources for high need youth and their families
- ❑ Increase employment options
- ❑ Expedite processes involving competency evaluations and restoration to reduce time people spend in jail



# Next Steps

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- County Council briefed twice on problems and opportunities in caring for people with MH/CD needs in the justice system by panel of criminal justice and community treatment experts
- Council passed motion calling for the development of a three phase action plan to address needs of people with CD/MH who are homeless and/or involved in CJ system



# What Convinced County Government to Act?

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## **Advocacy by key stakeholders:**

- Sheriff
- Jail director
- Prosecuting attorney
- NAMI
- Director of county mental health and substance abuse services
- Council staff with personal commitment to helping people recover from mental illness

## **Data:**

- 2/3 of people admitted to jail intoxicated or used drugs just prior to arrest
- Mentally ill stay in jail much longer than people without mental illness
- Daily cost for inmate is \$95, versus \$300 for mentally ill inmate
- Inmates with serious mental illness comprise 5% of total population, but 67% of highest jail utilizers

## **Personal stories:**

- Individuals and families invited to tell their stories, emphasizing how existing programs helped and what else was needed



# Action Plan Goal

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“to prevent and reduce chronic homelessness and unnecessary involvement in the criminal justice and emergency medical systems and promote recovery for persons with disabling mental illness and chemical dependency by implementing a full continuum of treatment, housing and case management services”.



# Phase I

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- Described the service improvements needed to meet the goals of the action plan, including what steps could be taken within existing resources.
- This work had already been substantially completed by the work group convened by the County Executive



## Phase II

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- Goal was to address changes in criminal justice processing to more effectively deal with people with mental illness and chemical dependency.
- Specifically asked to address prearrest diversion, prebooking diversion, alternative sentencing, assessment and discharge to connect directly to community services



## Phase II

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- ❑ Sequential Intercept Model used to organize work
- ❑ Separate workgroups for youth and adult populations
- ❑ Adult workgroup divided into community services and criminal justice system committees
- ❑ Both groups identified target populations, key intercept points, decision makers regarding diversion, information needed by decision makers, policy and legal changes needed, and services needed for successful diversion



## Phase III

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Included:

- ❑ Prevalence study of populations in jail, homeless, and in treatment systems
- ❑ Service improvements needed to meet needs of these populations
- ❑ Estimate of costs of providing services and benefits from providing these services
- ❑ Proposal for financing full set of improvements



# Prevalence Profile

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- ❑ Half of homeless in shelters have mental illness or chemical dependency
- ❑ Half of youth in detention have a mental disorder
- ❑ People of color are seriously overrepresented in adult and juvenile justice systems
- ❑ Mental illness is the leading cause of hospitalization for youth in Washington State
- ❑ 13% of individuals receiving public mental health services in 2006 had a history of at least one jail booking



# Phase Three Process

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Identified key stakeholders:

- ✓ County jail staff
- ✓ Jail health staff (provided by Public Health)
- ✓ Judges
- ✓ Prosecuting attorneys
- ✓ Public defense
- ✓ Law enforcement
- ✓ County Council staff
- ✓ Budget office
- ✓ Community and human services department
- ✓ Juvenile court
- ✓ Advocates
- ✓ Consumers
- ✓ Service providers
- ✓ Health Care for the Homeless



# Phase Three Process

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Outreach to numerous key stakeholder groups:

- Association of police chiefs
- County criminal justice committees
- NAMI
- Mental health and substance abuse treatment providers
- Youth service providers
- Downtown business association
- City governments



# Use of Sequential Intercept Model

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- Provided framework for workgroup to determine what services needed to be provided for which people at what locations and at what times in order to help prevent incarceration, hospitalization, and homelessness
- Expanded model to include people with substance abuse as primary problem, and to expand definition of core services to put more emphasis on youth and prevention



# Recommendations for Service Improvements in Action Plan

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## **Core Strategy Areas**

- Community Based Care
- Programs for Youth
- Jail and Hospital Diversion Programs



# Strategies for Service Improvements

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## Community Based Care

- ❑ Make treatment more available to those without insurance
- ❑ Improve quality of care
- ❑ Increase access to supportive housing



# Strategies for Service Improvements

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## Programs for Youth

- ❑ Provide prevention and early intervention
- ❑ Expand assessments for youth in juvenile justice system
- ❑ Expand team-based, intensive “wraparound” services for youth
- ❑ Expand services for youth in crisis
- ❑ Expand Family Treatment Court
- ❑ Expand Juvenile Drug Court



# Strategies for Service Improvements

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## Jail and Hospital Diversion Programs

- ❑ Divert people who do not need to be in jail before they are booked into jail
- ❑ Expand mental health courts and other post-booking services to get people out of jail and into services more quickly
- ❑ Expand re-entry programs for jails and hospitals



# Costs and Cost Offsets

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- Every dollar spent on treatment can save two dollars in health care and criminal justice costs
- Chemical dependency treatment can reduce felony arrests of youth by 54% and felony arrests of adults by 33%
- Providing supportive housing can reduce jail days by 62% and psychiatric hospital days by 51%
- Mental health courts have effectively reduced jail bookings

Ultimate Intercept

New and enhanced prevention and community treatment programs will prevent many adults from entering the criminal justice system

- Intercept 1
- Jail high utilizer program

- Intercept 1
- Crisis intervention training
  - Establish Crisis Diversion Center
  - Respite beds
  - Mobile crisis team

- Intercept 2
- Incoming Referrals to CJ Liaisons from:
    - ✓ Family members
    - ✓ DOC community corrections officers
    - ✓ Jail Health psychiatric evaluation specialists
    - ✓ Inmate requests
    - ✓ Public defenders and public defense social workers
    - ✓ Probation officers
  - Assessments requested by Intake Services

- Intercept 2
- Release prior to filing when community treatment available
  - Increase deferred prosecution cases
  - Increase referrals from Intake Services
  - Stay competency process to allow for community treatment

- Intercept 3
- Initial Referrals from CJ Liaisons:
    - ✓ Reconnect with existing mental health case manager
    - ✓ Link to COD treatment
    - ✓ Link to DSHS
    - ✓ Refer to VA
    - ✓ Link to ADATSA for CD treatment
  - Refer to Mental Health Court
    - ✓ Link to Housing Voucher and Case Mgmt Program
    - ✓ Link to COD treatment

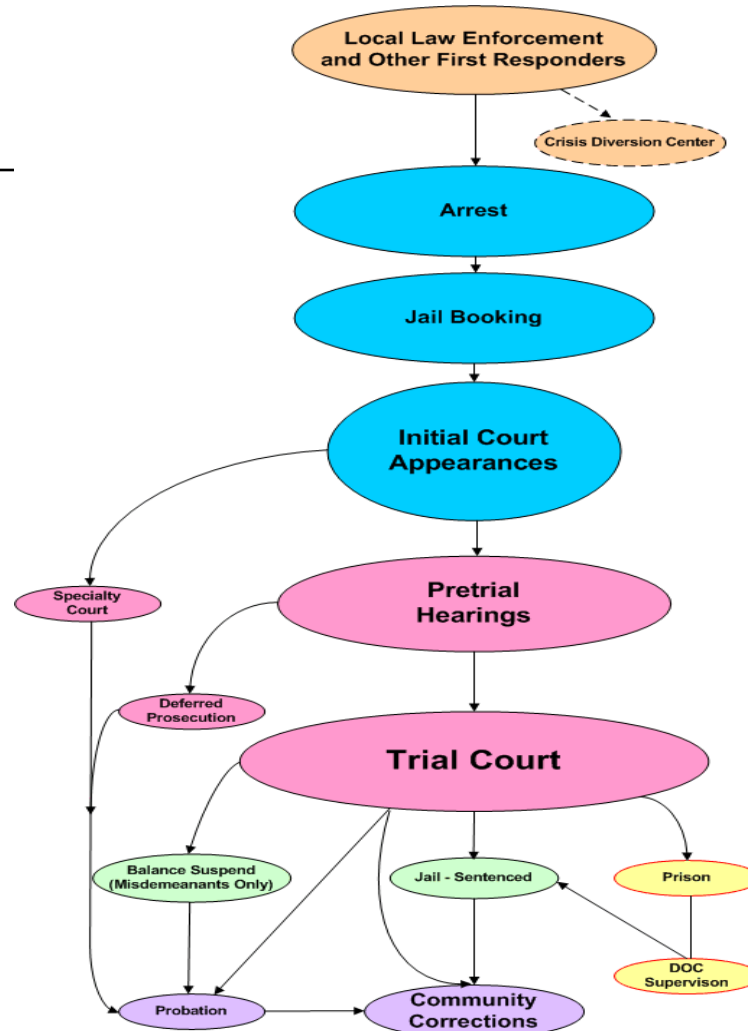
- Intercept 3
- Increase CJ Liaison staff in the jail in order to:
    - ✓ Reconnect more inmates to community services
    - ✓ Refer more veterans and their dependents to VA for treatment and housing
    - ✓ Increase felony drop down referrals to MH Court
  - Increase program services for existing and new MH courts

- Intercept 4
- Ongoing Referrals from CJ Liaisons:
    - ✓ Link to Reentry Case Management Program
    - ✓ Rental assistance

- Intercept 4
- Increase Reentry Case Management Program staff in order to assist more offender-clients in connecting to treatment and housing
  - Reduce MH caseloads

- Intercept 5
- Forensic Programming at Community Corrections:
    - ✓ Screen and assess CCAP participants for appropriate services
    - ✓ On-site CD treatment
    - ✓ On-site COD treatment
    - ✓ On-site educational classes

- Intercept 5
- Urinalysis testing supervision at Community Corrections
  - Increased access to community services for non-Medicaid clients
  - Housing supportive services
  - Employment services





# Building Partnerships for System Change

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- ❑ Set clear goals
- ❑ Use data and research
- ❑ Tell personal stories
- ❑ Outreach to community stakeholders and involve them in the planning
- ❑ Use meetings effectively: don't waste people's time
- ❑ Find a champion
- ❑ Intensively seek community support

# System Change Requires a Champion

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Bob Ferguson,  
King County  
Councilmember



The largest audience to ever attend a King County Council Town Hall Meeting gathered on June 25, 2007 to discuss the Mental Illness & Drug Dependency Action Plan.

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# Current Status

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- Endorsements received from over 25 human service organizations, Sheriff, Prosecuting Atty., district judges, and several cities
- The action plan has been accepted by King County Council on a unanimous 8-0 vote
- The King County Executive included on a 0.1% sales tax in his 2008 budget submission
- Council to vote on sales tax in November