

Assistant County Administrator

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2009	2010	2011	2012	2013
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	_____	_____	_____	_____	_____
External Revenues	_____	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
NET FISCAL IMPACT	<u>*</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>
# ADDITIONAL FTE					
POSITIONS (Cumulative)	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>

Is Item Included In Current Budget? Yes _____ No _____

Budget Account No.: Fund _____ Dept. _____ Unit _____ Object _____
 Program Code _____ Program Period _____

B. Recommended Sources of Funds/Summary of Fiscal Impact:

* By approving the strategic plan, the Board is not authorizing project or program expenditures. These will require separate Board items and/or budget approvals.

C. Departmental Fiscal Review: *mlg 4/29/09*

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Dev. and Control Comments:

[Signature] *5-6-09*
 OFMB *85/5/09*
pm 4-30-09
[Signature] *5/6/09*
 Contract Dev. and Control

B. Legal Sufficiency:

[Signature] *5/7/09*
 Assistant County Attorney

C. Other Department Review:

 Department Director

(THIS SUMMARY IS NOT TO BE USED AS A BASIS FOR PAYMENT.)

Background and Policy Issues (continued):

The goals for the strategic plan are to:

- Divert more persons into appropriate treatment settings prior to trial
- Enhance cross-system communication and coordination
- Promote consistent usage of proper medications
- Provide more community supports
- Reduce the number of persons of low public safety risk with mental health or substance abuse issues in jail

The strategic plan is organized into two major sections: adults and juveniles. Given the differences in how these two systems are structured, it was logical to approach them separately. Within the adult section, strategies are grouped into cross intercept strategies, pre-booking and community law enforcement strategies, booking, jail, and courts strategies, and re-entry and community support strategies. The juvenile section addresses all intercepts. This report presents the strategic plan adopted by the Criminal Justice, Mental Health and Substance Abuse Planning Council and by the Criminal Justice Commission.



**Palm Beach County
Criminal Justice Commission**

**Criminal Justice, Mental Health and
Substance Abuse Reinvestment Grant for
Strategic Planning**

Final Strategic Plan Report

Executive Summary

Submitted by:

Analytica

April 27, 2009

Entire Report is available at:

http://www.pbcgov.com/criminaljustice/committees/substance_abuse_council/

**Sponsored by Palm Beach County and the State of Florida Department of Children
and Families and the Substance Abuse and Mental Health Corporation**

Executive Summary

The impact of mental illness and substance abuse on the criminal justice system is a high priority for Palm Beach County. The Board of County Commissioners recently created a Criminal Justice, Mental Health and Substance Abuse Planning Council. The County has also been proactively seeking solutions to this problem through existing task forces and system assessments. These have highlighted the need to focus on diversion and improved discharge planning for persons who have been incarcerated as a result of behaviors resulting from mental illness, substance abuse, and/or co-occurring disorders.

The Need To Address The Interface Of Criminal Justice, Mental Health And Substance Abuse

In a 2007 study commissioned by the Palm Beach County Community Alliance¹, major findings revealed:

- 100,723 individuals reported serious mental illness in 2006
- 144,000 individuals aged 18-64 reported chronic depression for 2 or more years; prevalence of reporting is higher among low-income and uninsured individuals; prolonged depression is more often reported in women than men
- Approximately 6% of Palm Beach adults report having trouble accessing mental health services in the past year due to cost; among low-income individuals, more than 22% reported trouble accessing mental health services due to cost
- 19,836 individuals out of 96,634 respondents called the local 211 Information/Referral Hotline for mental health counseling
- 992 Baker Act cases were initiated in Palm Beach County in 2006
- Over 2,000 individuals in Palm Beach County received substance abuse services through the Department of Children & Families in 2006-07

Palm Beach County's population was 1,295,033 in 2006. Based on an analysis of Florida databases by the CJMHS Technical Assistance Center at the University of South Florida, a total of 14,606 individuals in Palm Beach County utilized mental health services, and 5,380 utilized substance abuse services. The Palm Beach Sheriff's Office (PBSO) operates one of the largest correctional systems in the nation, with an average daily population (ADP) of nearly 3,000 inmates in its three adult detention facilities and forecasted growth to 3,530 inmates by the year 2015. Key statistics are: (1) approximately 17% of the ADP receive some form of mental health services, (2) 4% (of the 17%) are taking medication for some type of mental health disorder, (3) Two percent (80 inmates) with SPMI, schizophrenia, or developmental disabilities are housed in one of four mental health units and (4) approximately 80% of inmates housed in the County jail also have a substance abuse disorder. In an effort to effectuate meaningful changes, Palm Beach County successfully applied for grant funds to develop the strategic plan described in this document. The goal is to work towards long-term systemic change so that the

¹ Investing in the Health of Palm Beach County's Citizens, Strategies For Strengthening the Safety Net For Individuals With Mental and Substance Use Conditions (February 2007)

number of persons with mental health disorders and/or dual substance abuse disorders in the criminal justice system is significantly reduced. Through this now completed strategic planning process, the County has assessed and identified systemic gaps and established priority strategies to move toward services delivered efficiently and seamlessly through our collaborative network of treatment and social service providers.

The plan is a product of the Florida Re-investment Act grant awarded by the Florida Department of Children and Families. Accompanying the plan itself are various documents developed during the strategic planning process to inform the discussion and decisions regarding the strategic plan.

These Issues Have Generated System Reform Activities Across Florida

Why is it important to address this issue? The Florida Substance Abuse and Mental Health Corporation reports that "the most conservative estimates, provided by the federal Bureau of Justice and jail based studies, is that 8 percent of the nearly 16 million annual arrests in the United States involve a person with a symptomatic mental illness. Prevalence estimates for all mental disorders among incarcerated populations run as high as 70-80 percent. In Florida, there were 638,275 individuals arrested in fiscal year 2006-2007 according to the Florida Department of Law Enforcement. An analysis completed by the CJMHSA Technical Assistance Center showed that 83,721 individuals (or 13.11%) had used services in the fiscal year prior to their arrest as reflected in the Medicaid and IDS files."²

Palm Beach County shares national and state concerns regarding criminalization of persons with mental health disorders and dual substance abuse disorders, and recognizes the critical need to implement viable options to incarceration for this vulnerable population. Each day, the County houses over 500 people with some form of mental health problem in its jails, the vast majority of whom will be quickly discharged back into the community without adequate services to prevent re-incarceration. Furthermore, over 2,400 individuals are incarcerated on any given day due to substance abuse problems. While the average length of stay for inmates in the general population is 33 days, those with mental health problems average 60 days in a setting not designed to meet their chronic needs.

For many individuals unable to access care in the community, the only options to receive treatment is by accessing care through some of the most costly and inefficient points of entry into the healthcare delivery system including emergency rooms, acute crisis services, and ultimately the juvenile and criminal justice systems.

On any given day in Florida, there are approximately 16,000 prison inmates, 15,000 local jail detainees, and 40,000 individuals under correctional supervision in the community who experience serious mental illness. Annually, as many as 125,000 people with mental illnesses requiring immediate treatment are arrested and booked into Florida jails. The vast majority of these individuals are charged with minor misdemeanor and low level felony offenses that are a direct result of their psychiatric illnesses. People with Serious Mental Illness who come in contact with the criminal justice system are typically poor, uninsured, homeless, members of minority groups, and experience co-occurring substance use

² 2008 Annual Report

disorders. Approximately 25 percent of the homeless population in Florida has a Serious Mental Illness and over 50 percent of these individuals have spent time in a jail or prison"³.

The Strategic Planning Process

The purpose of this project was to develop a strategic plan for addressing criminal justice, mental health and substance abuse issues in Palm Beach County. A comprehensive effort involving all stakeholders produced a series of strategic choices for improving services and addressing the issue.

The planning activities are described in detail in the full report. They included:

1. Phase I was the development of an environmental scan to identify the key issues (strengths, weaknesses, opportunities, and major challenges) that must be addressed in the plan. Analytica worked with staff of the CJC to identify Community Stakeholders who represent organizations and institutions that interact directly with mentally ill, substance abusing and/or homeless populations who are involved with Palm Beach County's Criminal Justice system. Between July 10, 2008 and August 20, 2008, Analytica and its partner on the CJC project, Strategic Partners Consulting, conducted individual and group interviews with 34 Community Stakeholders. The Stakeholders Perspectives Report summarizes the many diverse perspectives of individuals and organizations that interface with adults or juveniles with severe, persistent mental illness (SPMI), substance abuse or co-occurring disorders who have involvement with Palm Beach County's criminal justice, juvenile justice, behavioral healthcare, public health or homeless service systems. The report identified areas of agreement and disagreement. This report was utilized by the four workgroups to inform their recommendations for change strategies. (See *Appendix C for the full report*).
2. Phase II was a process mapping activity that began with several meetings with key informants who are knowledgeable about the various resources and understand how people move from place to place between the criminal justice and treatment realms. Those draft maps were then utilized by four workgroups to develop a SWOT analysis for their assigned component of the Sequential Intercept model. The maps were revised by each workgroup to represent the current system as it operates based on the experience of the workgroup participants. (See *Appendix D for the full set of process maps*).
3. Phase III was the establishment of four workgroups, each of which addressed a specific section of the Sequential Intercept Model. An important understanding that emerged from the workgroup activity is that stakeholders have differing understandings and expectations of what happens at any given intersection between one activity and another. When the workgroups identified disagreements about process or program, disconnects between activities, lack of capacity, or the need for better outcomes, strategic choices were recommended to the Council to be included in the Strategic Plan. The workgroups developed two documents; a). an analysis of the Palm Beach community's Strengths, Weaknesses, Opportunities and Threats (SWOT) found in *Section IV* of the full report; and b). Recommendations from each workgroup of

³ Florida Supreme Court Reporter.

strategic choices to be implemented through the Strategic Plan found in **Section V** of the full report. The four workgroups addressed:

- a. Intercept 1: Pre-booking , community law enforcement and emergency services
 - b. Intercepts 2 and 3: Booking, first appearance, courts, jail
 - c. Intercepts 4 and 5: Re-entry and community supports
 - d. Juvenile system strategies
4. Phase IV: A review of evidence based practices, best practices, accepted clinical practices and promising practices for mental health and substance abuse interventions and services to persons involved in the criminal justice system was prepared by Analytica. This provides a substantial resource for the Palm Beach County leadership as they move forward to implement their strategic priorities. *(See Appendix F for the full report.)*
5. Phase V: This **Executive Summary** presents a synopsis of the strategies prioritized for future implementation by the Criminal Justice, Mental Health and Substance Abuse Planning Council. This action, later endorsed by the Palm Beach County Criminal Justice Commission and accepted by the Palm Beach County Board of County Commissioners, created this plan. In developing the plan a modified version of the sequential intercept model was used as the organizing framework.

The Strategic Plan

The strategic plan is organized into two major sections: adults and juveniles. Given the differences in how these two systems are structured and purposed, it was logical to approach them separately. Within the adult section, strategies are grouped into cross intercept strategies, pre-booking and community law enforcement strategies, booking, jail, and courts strategies, and re-entry and community support strategies. The juvenile section addresses all intercepts. Each priority strategy is briefly described in the table below.

Sequential Intercept	Population	Priority Strategies
Cross-system	Adults	1. Establishment of a Criminal Justice/Mental Health/Substance Abuse Information System
Intercept 1: Pre-booking , community law enforcement and emergency services	Adults	2. Behavioral health agencies to designate specific individuals to serve as liaisons with the criminal justice community
		3. Expand Mobile Crisis services
		4. Expand the number of law enforcement officers trained in behavioral health crisis response (CIT training)
		5. Expand emergency housing alternatives
		6. Focus on dual diagnosed persons

Sequential Intercept	Population	Priority Strategies
Intercepts 2 and 3: Booking, first appearance, courts, jail	Adults	7. Expansion of forensic case management services
		8. Develop protocols that would facilitate the sharing of information about specific persons between the Jail and the Treatment agencies
		9. Judicial coordination of release time with the availability of behavioral health agency staff to be at the jail at the time of release
		10. Seek the continuity of Medicaid benefits so that released persons can more readily obtain treatment.
		11. Expand and better optimize existing treatment beds
Intercepts 4 and 5: Re-entry and community supports	Adults	12. Establishment of a coordinated case management system for persons with SPMI
		13. Strengthen discharge planning at the Jail for SPMI persons
		14. Expand transitional and permanent housing so that homelessness is decreased and increased stability in the community occurs.
		15. Expand community-based treatment
		16. Pilot a forensic FACT team based on the successful FACT approach which provides intensive supports to maintain SPMI persons in the community
All Intercepts	Juveniles	17. Develop an entity for Palm Beach County with the authority to facilitate, manage and hold accountable coordinated resources for the juvenile/adolescent population.

A. The Adult Section

Strategies in this section were prioritized by the four working categories of sequential intercept. The priority strategies for each intercept are reported below.

1. Cross system intercept. One strategy was endorsed as priority in this intercept category. It was the establishment of a Criminal Justice/Mental Health/Substance Abuse Information System that would provide just in time information so that system professionals have access to current information about criminal legal status, treatment status and key contacts. Participants in the process identified information gaps as a major impediment to decision

making and the major contributing factor to system inefficiencies. Two additional strategies were endorsed.

2. Pre-booking, community law enforcement and emergency services. Five strategies were endorsed as equal priorities in this intercept. One strategy was for behavioral health agencies to designate specific individuals to serve as liaisons with the criminal justice community to facilitate communication and serve as problem solvers if and when law enforcement officers are facing challenges accessing the behavioral health system. A second was to expand Mobile Crisis services so that additional resources are available in the field to the law enforcement officer. A third was to expand the number of law enforcement officers trained in behavioral health crisis response (CIT training). A fourth strategy was to expand emergency housing alternatives. This expansion would provide law enforcement officers with additional options and an alternative to jail when appropriate. The fifth was to create a specific focus on dual diagnosed persons and the appropriate pathway that the law enforcement officer should take when faced with someone who may be dual diagnosed. Four other strategies were endorsed.
3. Booking, Jail, Courts. Five strategies were endorsed as equal priorities in this intercept. One was the expansion of forensic case management services targeted specifically to this population to increase the likelihood of their receiving services. A second was to develop protocols that would facilitate the sharing of information about specific persons between the Jail and the Treatment agencies while conforming to HIPPA and other legal requirements. A third strategy sought to increase the likelihood of persons being released from jail receiving treatment by judicial coordination of release time with the availability of behavioral health agency staff to be at the jail at the time of release. A fourth strategy was to seek the continuity of Medicaid benefits so that released persons can more readily obtain treatment. A fifth strategy was to both expand and better optimize existing treatment beds. Eleven additional strategies were adopted.
4. Re-entry and community supports. Five strategies were endorsed as equal priorities in this intercept. One strategy is the establishment of a coordinated case management system for persons with SPMI. This strategy is consistent with the forensic case management priority of the Booking, Jail and Courts intercept and will be implemented in a coordinated manner. The second strategy is to strengthen discharge planning at the Jail for SPMI persons. This strategy is consistent with the Jail and Courts strategy of coordinated release. The third strategy is to expand transitional and permanent housing so that homelessness is decreased and increased stability in the community occurs. A fourth strategy is to expand community-based treatment, which would include additional beds as identified by the Jail/Courts intercept. A fifth strategy is to pilot a forensic FACT team based on the successful FACT approach which provides intensive supports to maintain SPMI persons in the community. Nine additional strategies were endorsed.

B. The Juvenile Section.

The Planning Council established one priority strategy. This strategy was for the Palm Beach County Criminal Justice Commission to implement, under its current authority, the role of facilitating, managing and holding accountable coordinated mental health and substance abuse resources for the juvenile/adolescent population. The Juvenile work group believed that the core issue facing Juvenile Services was to enhance the coordination and communication between the entities serving juveniles and that development of such an entity is the key first step in improving juvenile services.

The Planning Council endorsed a number of strategies for Criminal Justice Council to consider as it begins its work.

Enacting and managing the plan

For the strategic plan to be more than simply a document, it must be actively managed and modified over time as events unfold. To achieve this end, the Criminal Justice, Mental Health and Substance Abuse Planning Council will take responsibility for the plan itself. The Council will establish a sub-committee responsible for routine oversight of the plan with annual or bi-annual (as needed) meetings of the full Council to review and modify as needed. It is the further intent of the Council to actively review and seek funding opportunities through governmental grants, foundation proposals and re-design of current programs as appropriate to further the intent of the plan.