



## Objectives of the Cross-Systems Mapping Exercise

The Cross-Systems Mapping Exercise had three primary objectives:

1. The development of a comprehensive picture of how people with mental illness and co-occurring disorders flow through the Charlotte County criminal justice system along five distinct intercept points: Law Enforcement and Emergency Services (Intercept 1), Initial Detention/Initial Court Hearings (Intercept 2), Jails and Courts (Intercept 3), Community Re-entry (Intercept 4), and Community Corrections/Community Support (Intercept 5).
2. The identification of gaps, resources, and opportunities at each intercept point for individuals in the target population.
3. The development of priority areas for activities designed to improve system and service level responses for individuals in the target population.

The Charlotte County Cross-Systems Map created during the workshop is on the last page of this document.

## Resources, and Opportunities

There are several features of the Charlotte County Systems Map that are particularly noteworthy. These include, but are not limited to the items listed below.

Existing Cross-Systems Partnerships include:

- 3 Mental Health Court
- 3 Drug Court
- 3 24/7 Mobile Crisis Team
- 3 Juvenile Post Booking Diversion
- 3 Jail-based Competency Restoration
- 3 Community-Based Competency Restoration
- 3 Florida Assertive Community Treatment (FACT)
- 3 Coastal Behavioral Health Care Home To Recovery (Federal Homeless Grant)
- 3 Forensic Resource Coordination
- 3 Charlotte Behavioral Health Care (CBHC) Adult Substance Abuse Outpatient
- 3 CBH Children Substance Abuse Outpatient
- 3 CBH Crisis Stabilization Unit
- 3 Charlotte County Homeless Coalition
- 3 Faith-Based Homeless Shelter
- 3 Faith-Based Half-Way Houses
- 3 NAMI Education: Family to Family, Provider Ed, etc.
- 3 Establishment of the CJMHSA Council
- 3 The Haven, Consumer Owned and Operated Drop in Center

Strengths Identified

- 3 Charlotte County CJMHSA Planning Council has met several times and has established subcommittees
- 3 Strong leadership and enthusiasm to improve the system

## Charlotte County Cross-Systems Map Narrative

The following information reflects the notes taken during the *Cross-Systems Mapping* Exercise. These notes include a description of the map at each intercept point in the Sequential System Map by the Charlotte County CJMHSA Planning Council participants. Gaps in service delivery and resource opportunities are identified at each intercept point. These notes may be used as a reference in reviewing the Charlotte County Cross-Systems Map and as a tool in developing a formal strategic plan and future Memorandum of Understanding among the CJMHSA Planning Council members and other community stakeholders.

### Intercept I: Law Enforcement / Emergency Services

A person in need of acute behavioral healthcare can enter into the system in multiple ways. They can voluntarily admit themselves to one of the three hospitals (Charlotte Regional, Faucet Memorial or Peace River) or through contact with law enforcement and/or emergency services.

If law enforcement is dispatched, several scenarios may play out. An individual requiring immediate medical attention will be transported via ambulance to one of the three hospitals. These include Charlotte Regional, Faucet Memorial or Peace River. None of these are Baker Act receiving facilities. The two Baker Act receiving facilities in Charlotte County are Riverside, a private Baker Act Receiving facility, and Charlotte Behavioral Center, a public Baker Act Receiving facility. Charlotte Behavioral Healthcare Center has 18 Crisis Stabilization Unit beds (CSU). If there are no criminal charges pending, the individual may be released back into the community. If criminal charges are pending, then the individual is returned to police custody to complete arrest procedures.

Alternatively, the person in need or a third party may contact 911 and request the Mobile Crisis Unit or contact Mobile Crisis directly. The Mobile Crisis Unit operates 24 hours a day 7 days a week. There is one licensed mental health professional available during all hours of operation. They service about 100 calls a month referred from several sources (211, 911, private doctors, law enforcement and family members). On the occasion that they are referred by 911 or law enforcement, the Mobile Crisis Unit may attend the call for service with law enforcement officers. They conduct a mental health screening on scene and an assessment is made regarding possible diversion from jail. About 50% are diverted and then provide with treatment options.

#### ∅ Identified Gaps – Law Enforcement / Emergency Services (Intercept 1)

- › No Crisis Intervention Team (CIT)
- › Marchman Act, substance abuse petitions are not utilized effectively
- › There is currently no detoxification facility however it is expected to be operational by fall 2008 and will have 15 beds available
- › No Trauma Informed Training
- › Inadequate system in place to share information or data

## **Intercept II: Initial Detention / Initial Detention and Court Appearance**

Upon arrive at jail, an arrestee's first contact is with Prison Health Services, a private health care provider contracted by the county. In order to determine eligibility for jail services and treatment options classification, medical, mental health and substance abuse evaluations are administered during the booking process.

Within 24 hours of detention at the jail, all defendants appear before a judge via satellite for their initial court hearing. Prior to this all defendants are screened by pretrial services to determine eligibility for drug court, mental health, pretrial services or conditional

Potential Mental Health Court participants are reviewed by the State Attorney and admittance is decided case by case. In addition to the weekly meeting described above, an advisory committee meets quarterly for oversight purposes but do not make admission decisions. Felony cases take an average of three months to enroll in the program due to delayed pleas and other legal obstacles. During which time most defendants are held in jail.

## Intercept V: Community Corrections / Community Support

After judicial disposition or upon release from incarceration, individuals can be placed under the supervision of a number of community corrections agencies. These include work release, state probation, county probation, conditional release and pretrial services supervision. Release from jail can be at anytime of the day and no transportation is available. There is currently no shelter but one is expected to open in summer 2008. Affordable housing is limited. There are several faith based organizations that manage limited housing and the Volunteers of America (VOA) have 24 available veterans' beds in development.

### ∅ Identified Gaps - Community Corrections / Community Support (Intercept 5)

- › No transportation from jail
- › Currently no shelter
- › Lack of mental health follow up to assure compliance with treatment
- › No assistance with reinstating benefits
- › No specialized caseload for individuals with mental illness on release from jail or prison
- › Limited officer training

## The Charlotte County Action Plan

Subsequent to the completion of the Systems Mapping exercise, the assembled

## Priority Area 1: Community Education

Objective	Action Step	Who	When	
1.1	Implement CIT Training	§ Contact Partners in Crisis	Pam Baker	July 1
1.2	Gather Information			





## Priority Area 5: Communication and Coordination

Objective		Action Step	Who	When
5.1	Newsletter	§ Create a monthly newsletter § Maintain an email list for distribution	Kerry Dupuis	July
5.2	Meetings	§ Monthly Committee Updates § Monthly Committees Meeting	Kerry Dupuis	Monthly
5.3	Agreements	§ Establish business agreements § Establish Memos of Understanding § Find examples of each	Pam Baker	January

# Conclusions and Recommendations: Summary

## Resources

<b>Website Resources and Partners</b>	
Florida Criminal Justice Mental Health and Substance Abuse Technical Assistance Center	<a href="http://www.floridatac.org">www.floridatac.org</a>
Louis de la Parte Florida Mental Health Institute Department of Mental Health Law and Policy	<a href="http://mhlp.fmhi.usf.edu">http://mhlp.fmhi.usf.edu</a>
Florida Partners in Crisis	<a href="http://www.flpic.org">http://www.flpic.org</a>
Justice Center	<a href="http://www.justicecenter.csg.org">www.justicecenter.csg.org</a>
Policy Research Associates	<a href="http://www.prainc.com">www.prainc.com</a>
National GAINS Center/ TAPA Center for Jail Diversion	<a href="http://www.gainscenter.samhsa.gov">www.gainscenter.samhsa.gov</a>

<b>Other Web Resources</b>	
Center for Mental Health Services	<a href="http://www.mentalhealth.samhsa.gov/cmhs">www.mentalhealth.samhsa.gov/cmhs</a>
Center for Substance Abuse Prevention	<a href="http://www.prevention.samhsa.gov">www.prevention.samhsa.gov</a>
Center for Substance Abuse Treatment	<a href="http://www.csat.samhsa.gov">www.csat.samhsa.gov</a>
Council of State Governments Consensus Project	<a href="http://www.consensusproject.org">www.consensusproject.org</a>
National Alliance for the Mentally Ill	<a href="http://www.nami.org">www.nami.org</a>
National Center on Cultural Competence	<a href="http://www11.georgetown.edu/research/gucchd/nccc/">www11.georgetown.edu/research/gucchd/nccc/</a>
National Clearinghouse for Alcohol and Drug Information	<a href="http://www.health.org">www.health.org</a>
National Criminal Justice Reference Service	<a href="http://www.ncjrs.org">www.ncjrs.org</a>
National Institute of Corrections	<a href="http://www.nicic.org">www.nicic.org</a>
National Institute on Drug Abuse	<a href="http://www.nida.nih.gov">www.nida.nih.gov</a>
Office of Justice Programs	<a href="http://www.ojp.usdoj.gov">www.ojp.usdoj.gov</a>
Partners for Recovery	<a href="http://www.partnersforrecovery.samhsa.gov">www.partnersforrecovery.samhsa.gov</a>
Substance Abuse and Mental Health Services Administration	<a href="http://www.samhsa.gov">www.samhsa.gov</a>

