

Answering Mental Health Crises through 988 and Co-responder Teams

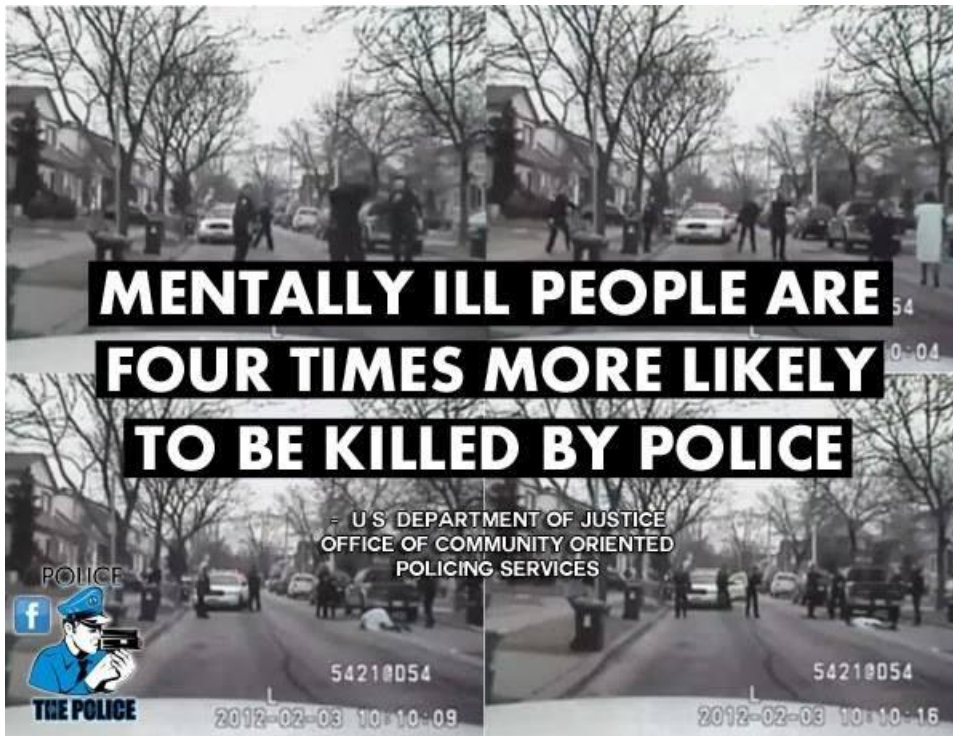


VIEWPOINT
Health

A Total Care Perspective

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The Challenge...



New Research Suggests 911 Call Centers Lack Resources to Handle Behavioral Health Crises

Training, emergency response options, and data reporting are key areas for improvement, says Pew study

The Data...

- 6-10% of all police contacts with the public involve persons with serious mental illnesses (*Livingston, 2016*)
- 29% of persons with serious mental illnesses in the U.S. had police involved in a pathway to care (*Livingston, 2016*)
- At least 1 in 4 individuals fatally shot by police had a serious mental illness (*Fuller et al., 2015; Lowrey et al., 2015*)
- Over 1 million arrests of persons with mental illnesses per year in the U.S.
- Evidence regarding whether mental illness increases likelihood of arrest is equivocal (*Engel & Silver, 2002*)
- Research on adults with autism found that during a 12-18 month period, 16% of the sample had a police contact. The most common reason was aggressive behavior (*Tint et al. 2017*)
- In the U.S., almost 20% of youth with autism report having police contact by age 21, almost 5% had been arrested (*Rava et al. 2017*)

Do you know what is the Nation's largest mental health hospital?

Los Angeles County Men's Central Jail



The Way?

- July 1, 2022 Georgia introduced 988
- The number is primarily for suicide prevention and emergent behavioral health crisis needs
- Part of a nationwide approach
- 988 is managed by Behavioral Health Link/Georgia Crisis & Access Line under contract with Department of Behavioral Health & Developmental Disabilities
- 988 is designed for Triage and Response

www.988ga.org

The Nuance?

- Logistics with texting - Texting goes to a national hotline. To chat with professional in Georgia, individuals must use MyGCAL app
- Logistics with non-Georgia Area Codes

The Challenge...

Here's a look at how the new 988 mental health hotline is working in Georgia

Call volume in Georgia has soared by 24% since switching over from the 10-digit National Suicide Prevention Lifeline to the new 988 system on July 16.

Enough workforce to respond to the need and call volume. Workforce challenges are throughout the healthcare sector.

Due to this, many times 988 will dispatch 911, which activates another service delivery model (if available)

Another Way...

View Point Health (VPH) is partnering with local Police and Sheriff Departments to address this challenge. VPH embeds behavioral health clinicians into field operations to dispatch with officers on mental health crisis calls, and to assist individuals obtain the necessary services after crisis conclusion. Embed means the clinician will be housed at the law enforcement agency with daily operations being managed by law enforcement administration. This model is referred to as **Co-Responder**.

VPH currently has partner ships with:

- City of Conyers Police
- City of Lawrenceville Police
- Gwinnett County Police
- City of Norcross Police
- Rockdale County Sheriff
- City of Chamblee Police
- City of Dunwoody Police
- City of Decatur Police
- City of Suwanee Police

The Why...

Research overwhelming suggests that when law enforcement agencies effectively partner with behavioral health professionals -

- (1) Individuals experiencing a behavioral health crisis get quicker access to quality care;
- (2) Both incarcerations and recidivism are significantly reduced for these individuals; and
- (3) This reduction allows governments and municipalities the option to redirect funding to other key personnel needs, infrastructure or the like.

The Benefits...

- Improvements in officer and deputy safety
 - Less use of force
 - Less injuries and loss of worktime
 - Less injuries to citizens
- Increase access to behavioral health services
 - Increased use of crisis services
 - More refers for appropriate mental health care
 - Increased continuity in community healthcare
- Decrease reliance on criminal justice system
 - Fewer arrest and increase in treatment
 - Increase in jail diversion
- Improved Community Relations
 - Increased in community policing

The Benefits, continued...

The law enforcement agency cost of embedding a behavioral health clinician is quickly offset by the savings seen in other areas of police work. These cost savings include:

- Fewer calls for service allowing officers to be more available and ready to address other pressing criminal complaints
- Fewer SWAT call-outs
- Fewer use of force incidents
- Reduction in civil lawsuits
- Reduction in time spent on mental health calls and coordination

One study of a mid-sized city showed a savings of approximately \$1,000,000 annually. *(Southern Medical Journal, June 2014)*

The Models...

Assigned Clinician

- ▣ Rides along with enforcement officer or deputy
- ▣ Responds to all calls and typically refers out for follow up
- ▣ Typically embedded in a specialized unit such as Behavioral Health Unit (BHU)

Dispatched Clinician

- ▣ Responds when needed and requested
- ▣ Uses own or agency-provided car
- ▣ More time allotted for follow-up and care coordination
- ▣ Better for smaller Departments

The Training...

Clinician Side:

- Integrating Communications, Assessment and Tactics (I-CAT)
- Counseling on Access to Lethal Means (CALM)
- Columbia Suicide Severity Rating Scale (C-SSRS)
- Police Department Policies and Procedures
- Specifics in Developmental Disability and Sensory Perception
- Use of Force Tactics and Procedures

Officer Side:

- Integrating Communications, Assessment and Tactics (I-CAT)
- Counseling on Access to Lethal Means (CALM)
- Mental Health First Aid (MHFA)
- Question, Persuade, Refer (QPR) Suicide Prevention Training
- Crisis Intervention Training
(MHFA & QPR not required if CIT is completed)
- Officer Survival Training

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The SOPs...

- New Employee Orientation
- Law Enforcement/Co-responder Specialized Training
- Dress Code
- On call procedures
- Time off requests and co-responder coverage
- Equipment (e.g., Telecommunications, Computer & Body Armor)
- Professional Conduct
- Progressive Discipline

- Response time to (1) Emails (2) Voicemails (3) Law Enforcement requests (4) On call requests
- Expectations during Use of Force Incident
- Bell, Book, Candle Test

Bell - Does the decision or action sound right?

Book - Does the decision violate any written laws, rules, or policies?

Candle - How will the decision look when exposed to the "light of day", or public scrutiny?

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The Funding...

BUDGET OPPORTUNITIES:

- Police Department Discretionary Funds
- Police Department Budget Proposal/Amendment
- County Allocation Funds for Criminal Justice Reform
- DBHDD State Funding for Co-responder Programming
- Billable services through Insurance providers

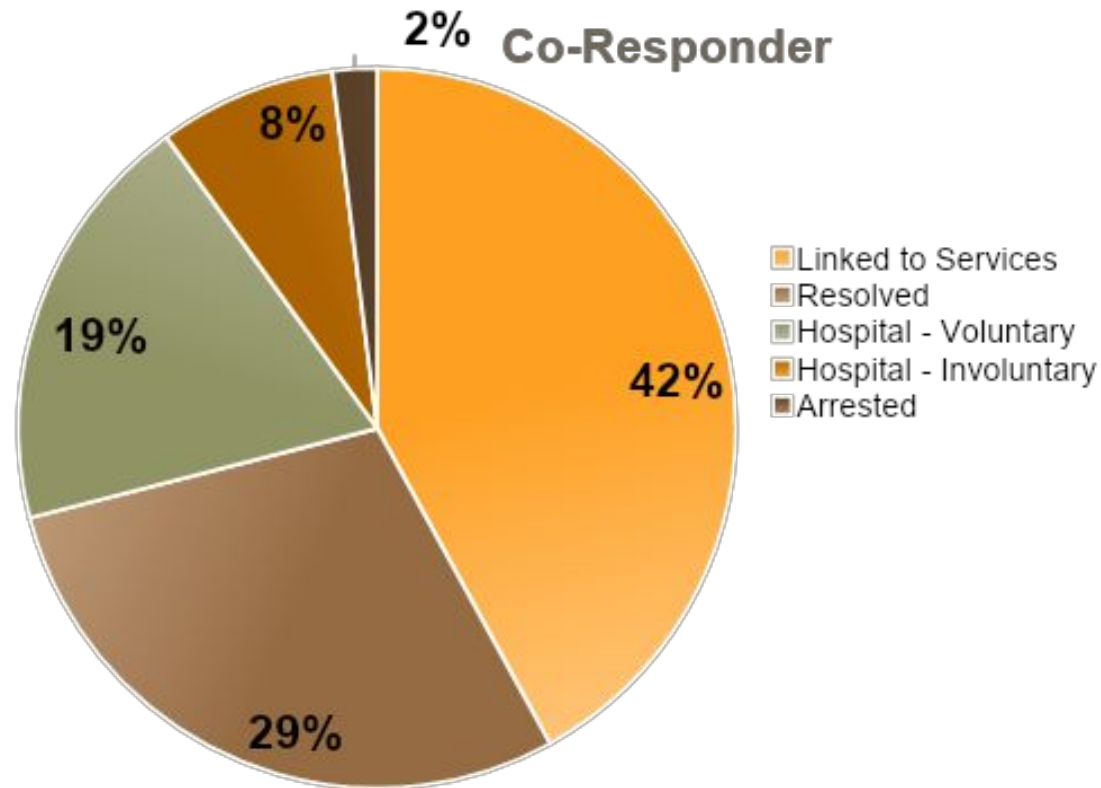
GRANT OPPORTUNITIES:

- Bureau of Justice Administration (BJA) (e.g., Protect & Connect)
- DOJ Community Oriented Policing Services (COPS)
- Substance Abuse Mental Health Services Administration (SAMHSA)
- Public Safety & Community Violence Reduction (PSCVR)
- America Recovery Plan Act (ARPA)

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The Results...

Monthly average = 370 response calls



**98.4% Diversion
Rate**

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The Impact...

The *Diverted from Arrest* sub categories are:

- Linked to services without involuntary commitment such as a 1013. Follow up from co-responder/care coordinator provided to individual.
- Linked to services with an involuntary commitment such as 1013
- Family member or friend engaged and voluntarily transported individual to emergency department for medical reasons. Follow up from co-responder/care coordinator provided to individual.
- Safety plan provided on site and no additional action is needed or warranted.

The current co-responder law enforcement savings per month is estimated at **\$80,000**. This is calculated by the average office hourly rate multiplied by how much time an officer is back on the street because of the co-response.

The Next...

One of the main keys to the Co-responder model is the coordination and follow up after the crisis. VPH is currently working with select law enforcement agencies to design and implement an *Enhanced Co-Responder* design which includes embedding a care coordinator and/or Peer Specialist to manage all follow up. This follow up can include, but not limited to resource development and linking; transitional or supportive housing; benefits counseling and acquisition; and much more.

The Highlights...

Gwinnett police's mental health team helped end Greyhound bus standoff

