

# Innovation, Collaboration, and Partnership between Crisis Services and 1<sup>st</sup> Responders in Harris County, Texas

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Location of  
presentation

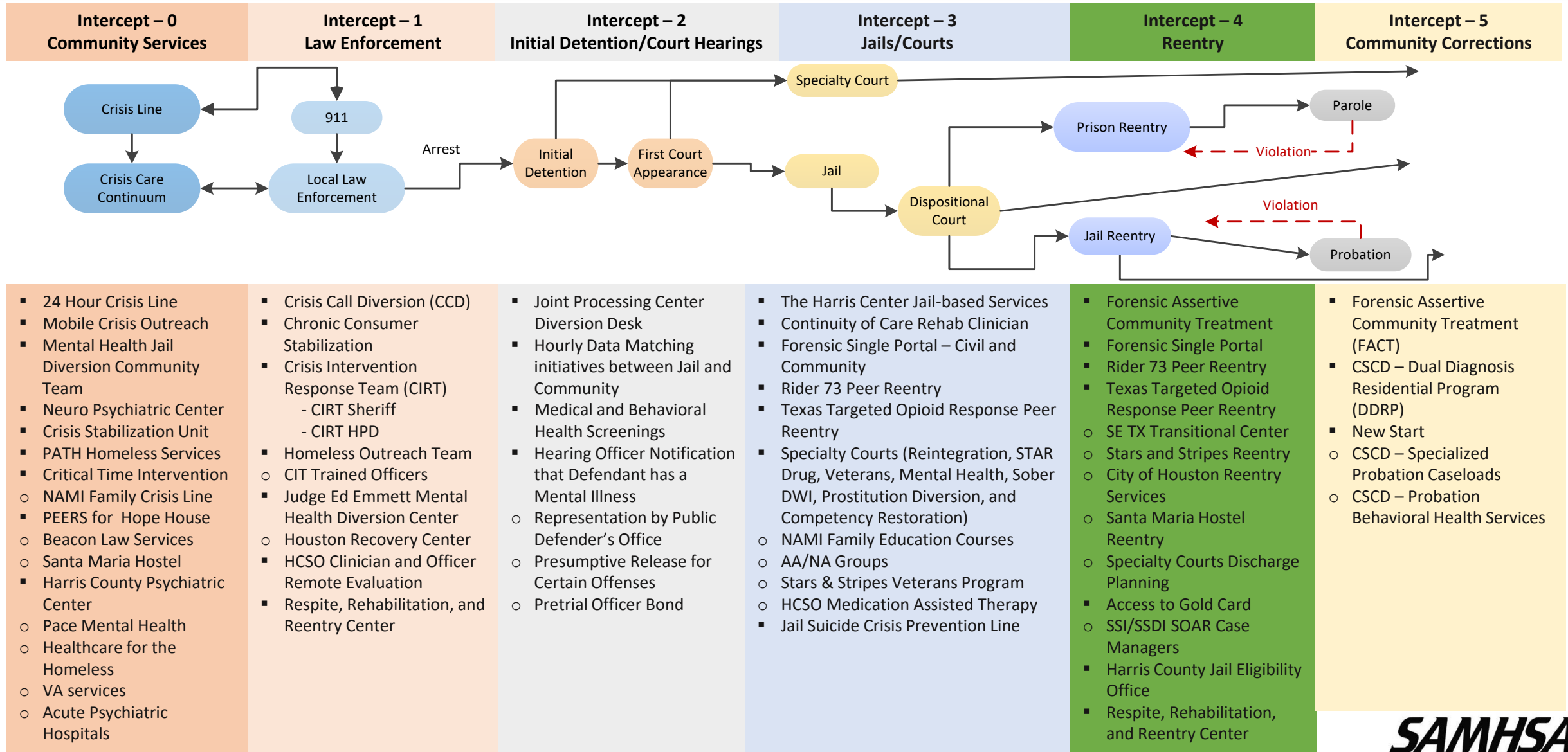


**SAMHSA**  
Substance Abuse and Mental Health  
Services Administration

# Disclaimer Slide

This webinar was developed [in part] under contract number HHSS283201200021I/HHS28342003T from the Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services (HHS). The views, policies and opinions expressed are those of the authors and do not necessarily reflect those of SAMHSA or HHS.

# Harris County: Sequential Intercept Map





# Law Enforcement Collaborations

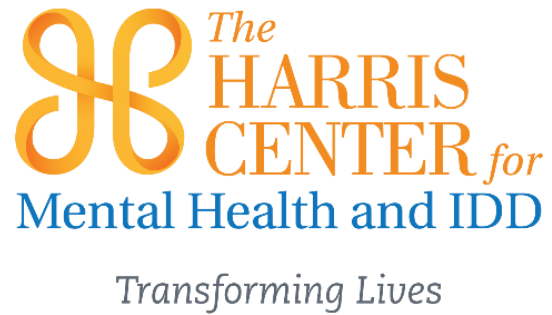


# The Harris Center's Crisis Services and Law Enforcement Collaborations

- Crisis Call Diversion
- Clinician and Officer Remote Evaluation (CORE) program
- Respite, Rehabilitation, and Reentry Center
- Judge Ed Emmett Mental Health Diversion Center
- Outpatient Competency Restoration Services
- Crisis Intervention Response Teams
- Homeless Outreach Teams
- Chronic Consumer Stabilization Initiative



# Crisis Call Diversion Collaboration



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# Success through Collaboration Phase 1 Pilot

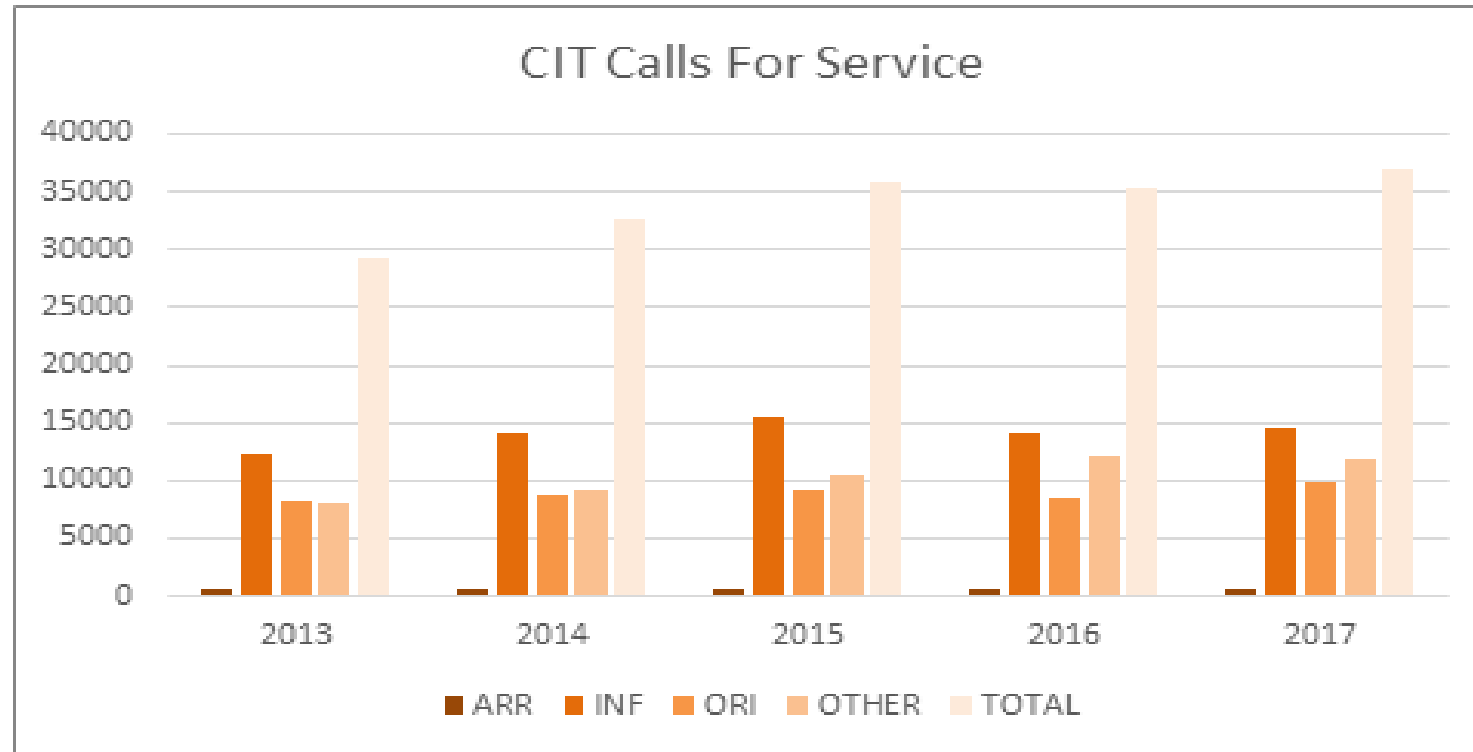


- Largest behavioral and developmental disability care center in Texas.
- Served over 85,000 individuals in FY 2018 with a full range of community-based programs.
- Partners with community advocacy organizations, hospitals, foundations, governmental entities, non-profits, and others to connect its consumers with the best available care.



- Largest police department in Texas.
- Largest number of CIT trained officers in the country, approximately 60%.
- The mission of the Houston Police Department's (HPD) Mental Health Division is to provide a professional, humane, and safe response to individuals in a serious mental health crisis.
- Issue: In 2017, HPD responded to 37,032 calls for service coded as mental health related. 41% resulted in information only outcomes.

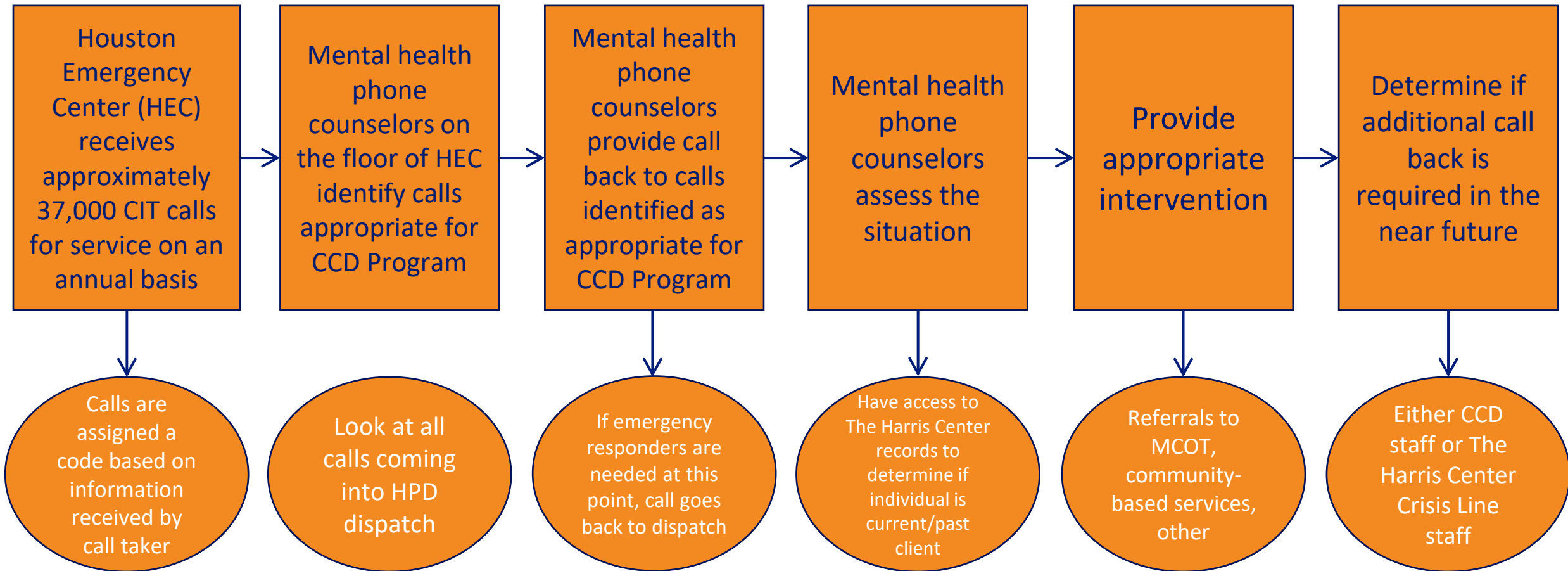
# HPD's Mental Health-related Calls for Service



Approximately 15,000 calls coded as mental health-related in 2017 were cleared as “information only” indicating the subject was not found to be in mental health crisis and may have only needed consultation or referral information. The same percentage of potential deferrals can also be seen in the preceding years.



# CCD Pilot Phase 1 Flow: March 2016 – June 2017 (HPD only)

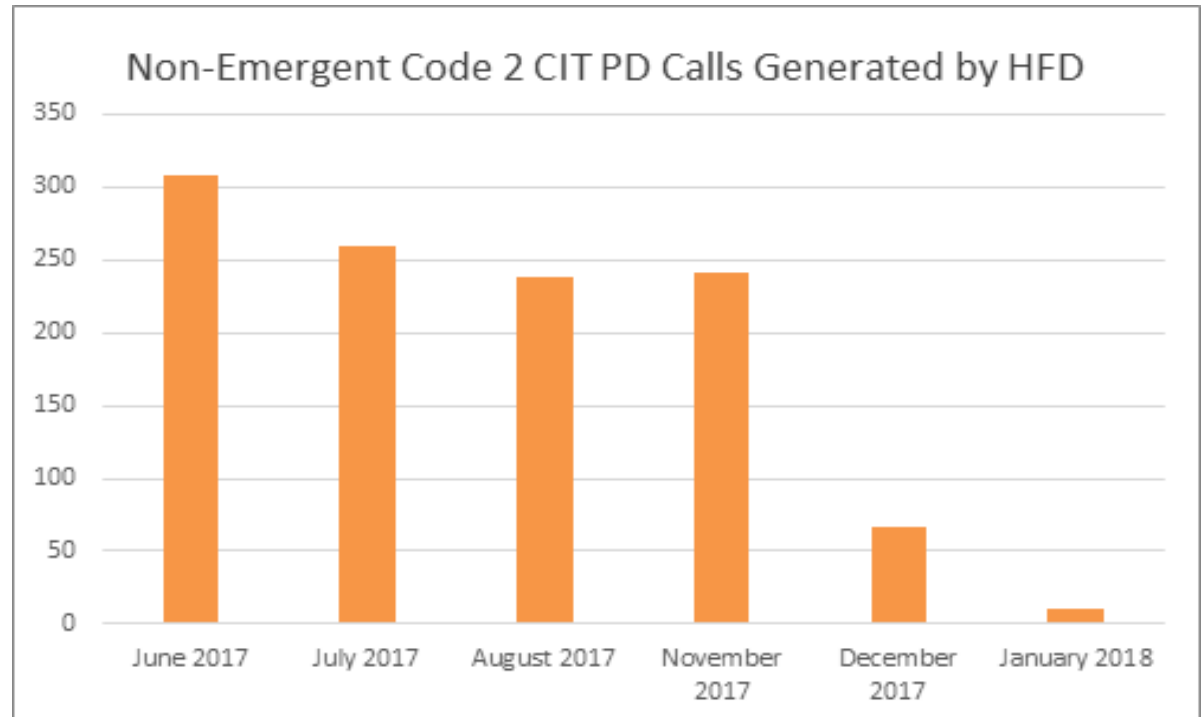
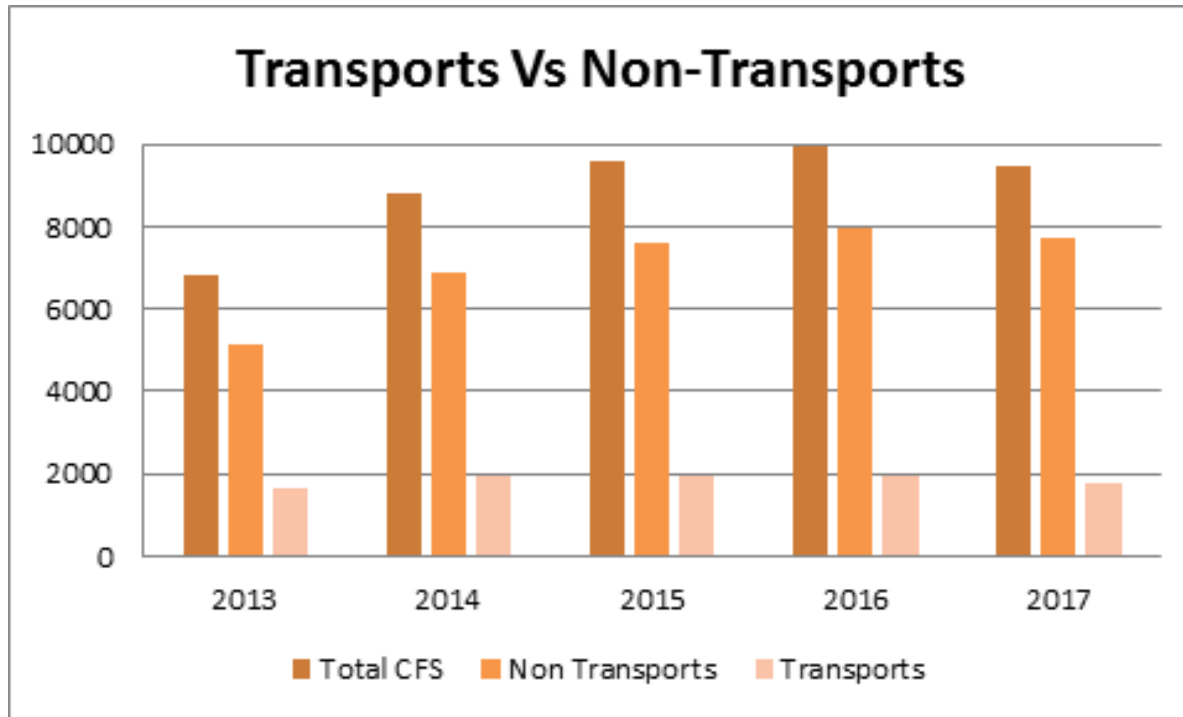


# Success through Collaboration Phase 2



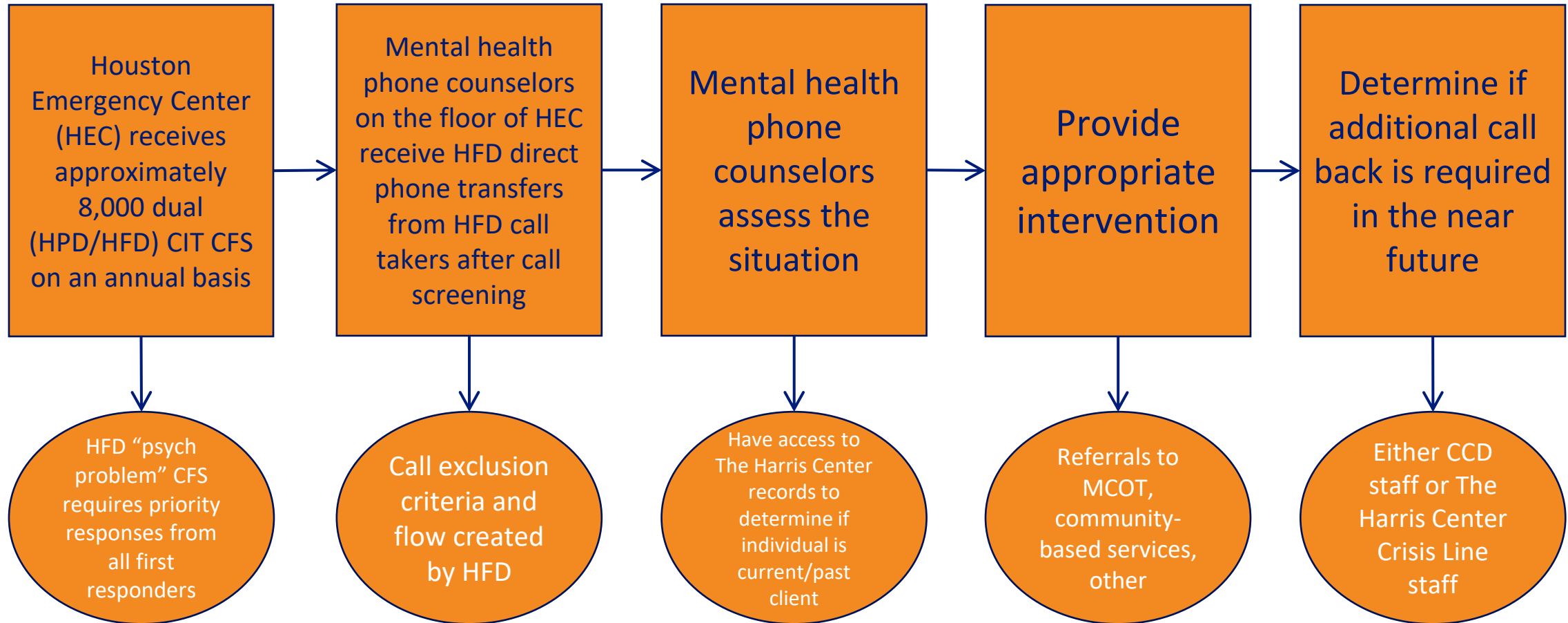
- Largest fire department in Texas.
- The mission of the Houston Fire Department (HFD) is to save lives, protect property, and serve our community with courage, commitment and compassion.
- On average HFD responds to over 600 dual-dispatched psychiatric calls per month where transport occurs about 25% of the time.

# HFD's "Psych Problem" Calls for Service



HFD's "Psych Problem calls" historically required automatic, high-priority, dual-response from both HFD/HPD. For the past 5 years, 75%-82% of the psych calls that HFD responded to with HPD were non-transports. Now, with CCD conducting a secondary in depth assessment of these non-emergent psych/CIT calls, we anticipate a significant reduction in dual, high-priority responses when it comes to CIT calls for service while still providing the appropriate resources to the caller. This also eliminates the unnecessary dual HFD/HPD response. In June 2017, there is a significant reduction in 1<sup>st</sup> party HFD CIT calls and later after December 15, 2017 following full deferral of all non-emergent HFD CIT calls.

# CCD Pilot – Phase 2 Flow June 2017 (HPD & HFD)





# Crisis Call Diversion Successes

6.2K calls diverted completely away from law enforcement response between March 2016-April 2020

Equivalent of 9.3K hours of police time and \$1.1 M.

2.3K calls diverted completely away from fire department response between June 2017 – April 2020

At an estimate of \$1404 per response or \$3.2 M.

2.7K community referrals provided to callers

Include mental health/ substance use treatment, primary medical care, basic needs, and others

Identified 1.3K callers who were current clients of The Harris Center

Alerted treatment teams to the 911 interaction

76 patient referrals sent to Mobile Crisis Outreach Teams (MCOT) for follow up

MCOT is staffed by the Harris Center with a psychiatrist and responds to client's location

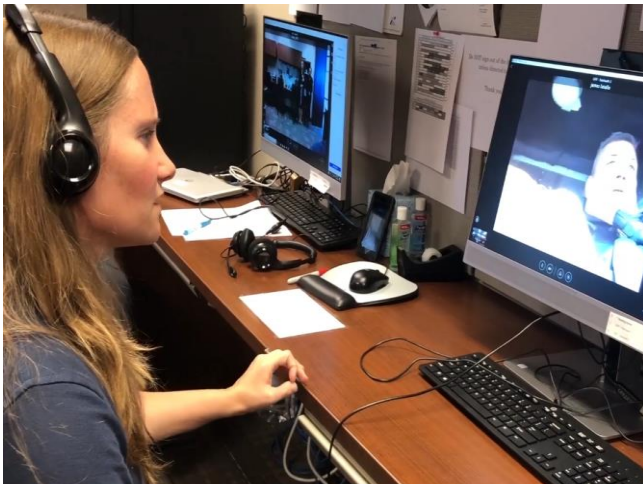
Have completed 2.6K safety plans with callers

Concrete strategies that include coping skills and steps to take to reach out for appropriate help

# Clinician and Officer Remote Evaluation Program (CORE)



- A partnership between the Harris County Sheriff Office and The Harris Center to improve response to calls involving a person with mental illness, the CORE program connects a law enforcement 1st responder with a mental health clinician using a tablet and HIPAA-compliant technology.



- Increase public safety;
- Improve triage of mental health crisis calls in the field;
- Fill gaps of limited mental health workforce; and
- Prevent unnecessary transports to the Harris County Jail, treatment facilities, and hospital emergency rooms.

# Phase Implementation of CORE

Phase

01

## Primary Goals

- Establish the concept could work and that technology was legitimate approach to address problems.



## Early Learnings

- Private contractor lacked robust patient history
- 1 physician limited availability of service

02

## Primary Goals

- Validate effectiveness of technology.
- Add non-physician clinicians.
- Expand access to patient history.



## Early Learnings

- Some areas had intermittent network coverage.
- Need to identify what constitutes an appropriate call.

03

## One Year Full Scale Pilot Program (12/18 – 12/19)



- 7 days per week coverage from 6 AM to 11 PM.
- 2 clinicians and 20 deputies.

# CORE is a behavioral health workforce multiplier



## Pre-CORE



1 CIRT Masters  
Level Clinician



1 Deputy

9 CIRT Masters  
Level Clinicians



Initially 100 Deputies  
with an iPad with  
access to a clinician –  
Currently expanding  
to 200 Deputies and  
Constables





# Law Enforcement Perspective

- Better assessments available to deputies on the scene.
- Increased ability to resolve the situation on the scene.
- Reduction in transports.
- Assist deputies on the scene with useful information, such as patient history.
- Time reduction.
- Frees up Crisis Intervention Response Teams (CIRT) to respond to more serious situations.



Mental Health & Jail Diversion  
@HCSO\_MHU

Day & Night we will respond. Deputies attend CORE training where they received an iPad to better assist them when responding to behavioral health related calls. This program connects the deputy with a mental health professional out in the field 24/7. [#NightShift](#) [#HCSOCares](#)



# Evaluation: CORE

University of Houston Downtown evaluated the program in October 2020.

Question	% Yes Response
Would you have called CIRT if you did not have an iPad?	88%
If you did not have the assistance of the clinician, would you have transported the consumer to the NPC/hospital/ER?	78%
Did the clinician/psychiatrist help you safely de-escalate the consumer?	86%
Did the clinician help you identify/access resources you would not otherwise have identified/accessed?	89%
Did the clinician help you decide what course of action to take with the consumer?	93%
Do you believe the clinician helped you handle the call in a shorter period-of-time than if you responded without the clinician?	88%

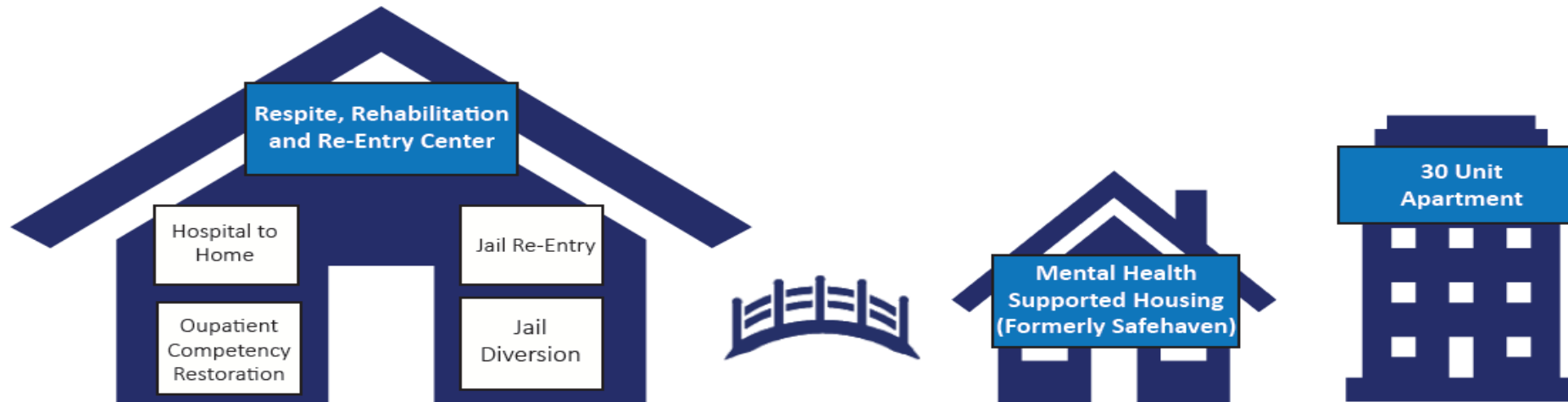
- 42% were resolved
- 58% resulted in transportation to hospitals
- 1 person was transported to jail
- 1 person was transported to Juvenile Detention

# CORE Evaluation Key Recommendations

- HCSO and The Harris Center continue their partnership to operate the CORE program.
- Qualitative data suggests that CORE has wide scale stakeholder support and meets the goal of providing resources to law enforcement to assist them in effectively responding to mental health crisis calls.
- Fidelity to the model depends on deputies, clinicians, and managers having clear guidelines for practice.
- HCSO and The Harris Center should together develop a comprehensive CORE Handbook (CORE Implementation Guide), which should be regularly updated.



# Respite, Rehabilitation, and Re-entry Center



## 1 Hospital to Home

24 beds available to provide rehabilitation services to people who are homeless and have a serious mental illness. These individuals will receive comprehensive rehabilitation services intended to help them successfully transition to more permanent housing options. Estimated stays of 90-180 days.

Targeted Patients:

- 1) HCPC Discharge
- 2) State Hospital Discharge
- 3) NPC Discharge
- 4) Private Psych Hospitals
- 5) Harris Health Emergency

## 2 Jail Diversion

36 beds available for a pre-charge diversion center accepting law enforcement drop offs 24/7. This would be a relocation of the existing diversion center to maximize economies of scale. Average stays of 4-10 days.

## 3 Outpatient Competency Restoration

8 beds available to provide outpatient competency restoration services for 60-120 days.

## 4 Jail Re-Entry

20 beds available for individuals leaving Harris County Jail with no safe place to live. These beds are intended to be short-term in nature and transition quickly as individuals find appropriate living arrangements. Estimated stays of 3-5 days.

## 5 Mental Health Supportive Housing (Formerly Safehaven)

24 beds that are not co-located, but are available to provide transitional housing in single room occupancies for people with serious mental illness. Estimated stays of 3-12 months.

## 6 Mental Health Apartment Unit

26 units on-site with a diversion, rehabilitation and re-entry rent for people with serious mental illness.

## 7 Additional Beds

20 additional beds available to provide opportunity for growth and expansion of programs.



# Respite, Rehabilitation, and Re-entry Center

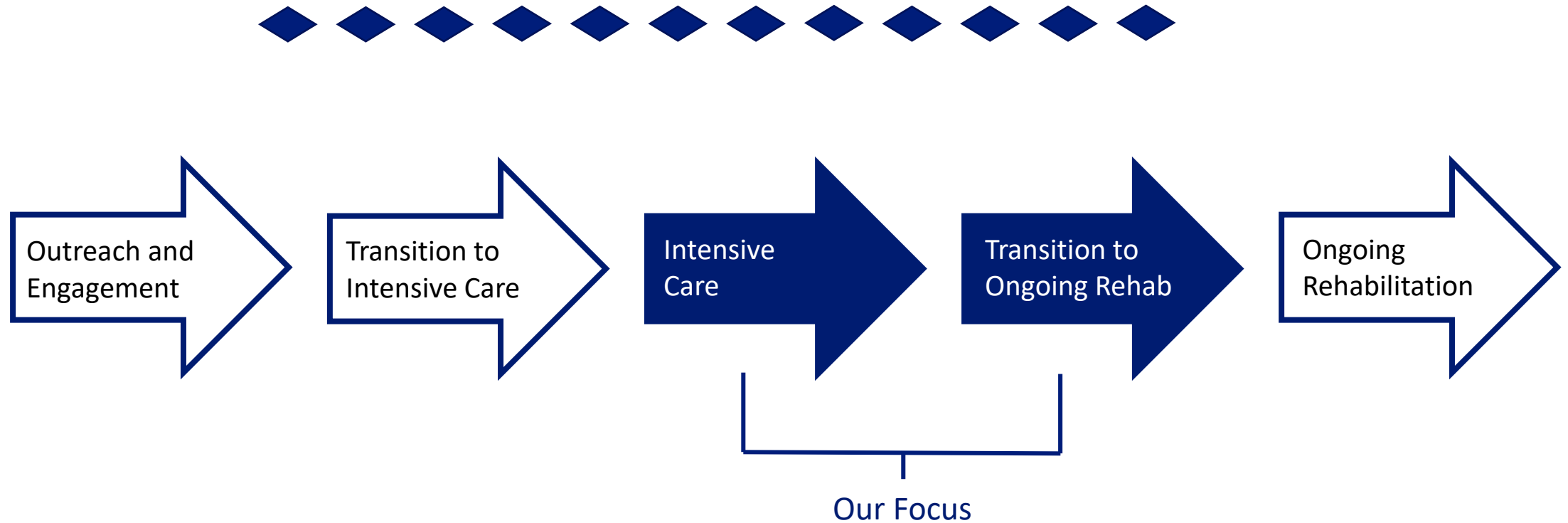
- As a public health response, Harris County, the City of Houston, and The Harris Center, developed the COVID-19 Community-Wide Homeless Housing & Mental Health Respite Initiative to transition at-risk individuals with mental illness off our streets and out of crowded shelters.
- This initiative will reduce the number of emergency interventions by providing housing, treatment and resources to assist these vulnerable individuals to achieve community stability and rehabilitation.
- Fully fenced 5-acre site.
- Approximately 40,000 sq. ft.
- 108 Beds.
- Converted from a shelter after previously being a hospital.



# Respite, Rehabilitation, and Re-entry Center Ribbon-cutting



# Respite, Rehabilitation, and Re-entry Center



# Respite, Rehabilitation, and Reentry Center: Selected programs

- **Hospital to Home**
  - 24 beds to provide rehabilitation services to targeted patients who are discharged from a psychiatric facility and are homeless (90 – 180 days).
- **Outpatient Competency Restoration**
  - 8 beds to provide outpatient competency restoration services for low-level, non-violent defendants (60 – 120 days).
- **Jail Re-entry**
  - 20 beds for persons discharged from the Harris County Jail with no place to stay. (3 - 5 days).
- **Judge Ed Emmett Mental Health Diversion Center**
  - 36 beds relocating from existing diversion center (4 – 10 days).



# Why We Need a Diversion Center

- The Neuropsychiatric Center was the current diversion location for anyone with acute mental health issues, but the sub-acute, non-emergency mental health population had few diversion options.
- Of 4,585 defendants booked into Harris County Jail in 2016 for trespassing charges, 3,886 (85%) of cases had a mental health or homelessness issue.
  - 596 were repeat defendants.
- On average, nearly 3,000 inmates are in the Harris County Jail are on psychotropic medications ***every day***.
- In 12 months, 170 defendants charged with Class B trespass were determined not competent to stand trial. This population served a total of 11,785 days in jail.

# Collaborative Partners for a Diversion Center



- The Harris Center for Mental Health & IDD
- Harris County Judge's Office
- Harris County Sheriff's Office
- Harris County District Attorney's Office
- Houston Police Department
- Harris Health
- Harris County Housing Authority
- Harris County Commissioners Court
- Harris County Criminal Justice Coordinating Council





# Judge Ed Emmett Mental Health Diversion Center

## Eligibility

- Offenders who commit low level, non-violent crimes
- Those who appear to have or have a history of mental illness
- Not in an acute crisis – does not meet criteria for Emergency Detention
- Voluntary
- Adult



# Judge Ed Emmett Mental Health Diversion Center

## On Site Services

- Assessments
- Integrated treatment and care plans to assist in an individual's stabilization
- Medication management
- On site primary care
- On site psychiatric care
- Psychosocial programming
- Substance use disorder interventions
- Rehabilitation services
- Respite beds
- Peer support
- Extensive discharge planning to coordinate access to housing, social services and treatment post discharge, utilizing case managers and peer support



# Offenses not eligible for Diversion

- DWI
- Weapons offenses (i.e., UCW, Discharging a Firearm, Deadly Conduct)
- Assault
- Domestic Violence offenses (i.e. Assault-Family Member, Terroristic Threat on Family Member, Violation of Protective Order)
- Terroristic Threat
- Burglary of a Motor Vehicle
- Any offense where public safety could be compromised

***Special Note:*** No open warrants or detainers



# Examples of Expanded Charges

Diversion eligibility criteria may include other non-violent, misdemeanor charges that do not create a public safety threat:

- **Criminal Mischief** - Defendant kicked metro bus door and broke glass - \$500 damage
- **Theft <\$750** - Defendant stole coffee pot while trespassing at urgent care clinic
- **Obstruct Highway/Passageway** - Defendant standing in roadway begging for money
- **Failure to Identify** - Defendant identifies himself to officer as Jesus Christ
- **Indecent Exposure** - Defendant urinating in public
- **Interfere with Public Duties** - Defendant approach officer on unrelated traffic stop and refused to leave
- **False Report** - Defendant calls 911 repeatedly to report someone is zapping her brain
- **Drug Possession** -Variety of offenses - Defendant has Xanax in his pocket when detained for trespassing at gas station

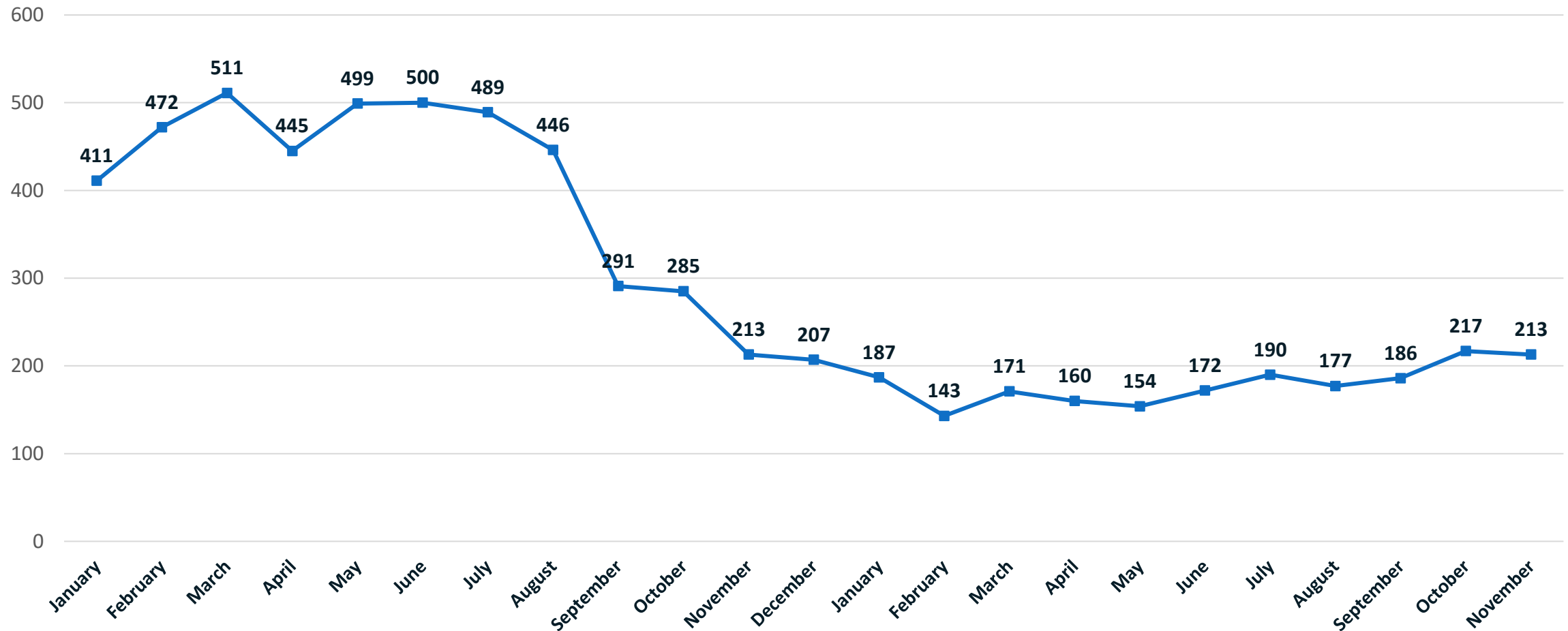
# Communication: Law Enforcement Engagement

Very public discussion and announcements regarding the creation and the expansion of charges to address questions and build support.

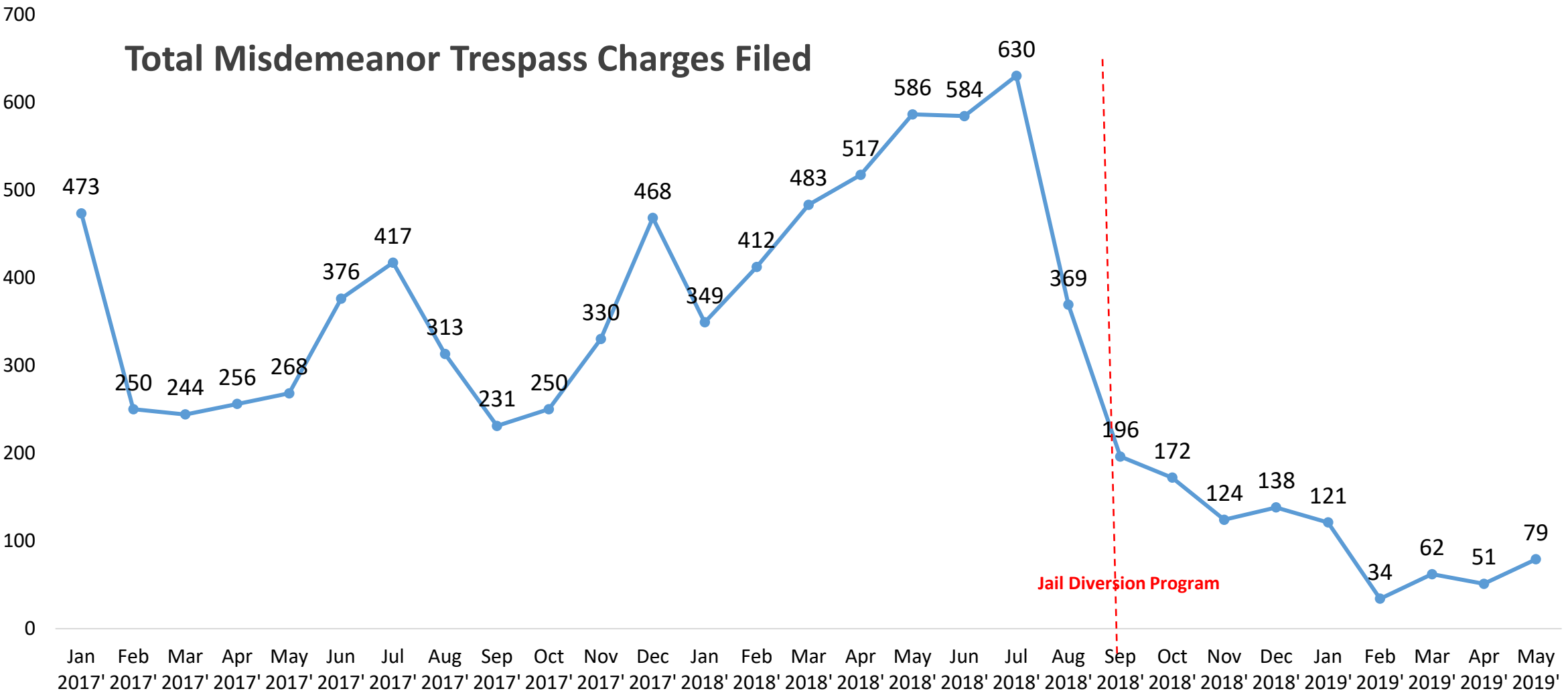


# Early Outcomes FY 2019

## Total Misdemeanor Trespass Charges Filed



# Harris County Jail Bookings for People with Harris Center History



# Evaluation: Diversion Center

- Diverted 3,069 people with mental illness from the Harris County Jail in its first 2 years of operation.
- Justice System Partners evaluated the program in October 2020. Key findings include:
  - There was a 50% reduction in bookings post-diversion.
  - When comparing diversion group to a control group, those diverted were 1.3 times less likely to be booked into jail on a new charge than those not diverted
  - Those diverted with 5+ bookings were 3.1 times less likely to be booked into jail on a new offense than those not diverted
  - Those diverted with no prior bookings were 44 times less likely to be booked into jail on a new offense than those not diverted
  - For every \$1 spent on diversion, the county avoided spending \$5.54 on criminal justice costs.