Alachua County, Florida

Sequential Intercept Mapping Report

January 19-20, 2022

UNIVERSITY of SOUTH FLORIDA

College of Behavioral & Community Sciences

Criminal Justice, Mental Health, and
Substance Abuse Techincal Assistence Center

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Alachua County SIM Report Abbreviations

Below is a list of abbreviations that may be helpful when reading the Alachua County Sequential Intercept Mapping (SIM) narrative and map.

AA	Alcoholics Anonymous
ACCC	Alachua County Crisis Center
ACSO	Alachua County Sheriff's Office
ACHA	Alachua County Housing Authority
AHCA	Agency for Health Care Administration
APIC	Assess, Plan, Identify, Coordinate Model
ARF	Addictions Receiving Facility
ARNP	Advanced Registered Nurse Practitioner
AUDIT	Alcohol Use Disorders Identification Test
BA	Baker Act
BJA	Bureau of Justice Assistance
BJMHS	Brief Jail Mental Health Screen
CCC	Community Support Services
CIT	Crisis Intervention Team
CJMHSA	Criminal Justice, Mental Health, and Substance Abuse
CJMHSA TAC	University of South Florida Criminal Justice, Mental Health, and Substance Abuse Technical Assistance Center
COD	Co-occurring Disorders (substance use and mental health)
CRS	Central Receiving System
CRF	Central Receiving Facility
CRT	Co-responder Teams
CST	Centralized Screening Team
CSU	Crisis Stabilization Unit
DAST	Drug Abuse Screening Test
DCF	Florida Department of Children and Families
EMS	Emergency Medical Services
ER	Emergency Room
FDC	Florida Department of Corrections
FACT	Forensic Assertive Community Treatment Team
FICM	Forensic Intensive Case Management
GOC	Gainesville Opportunity Center
GPD	Gainesville Police Department
JMHCP	Justice Mental Health Collaboration Program
JPM	Jail Population Management
IDD	Intellectual and Developmental Disabilities
ITP	Incompetent to Proceed
LE	Law Enforcement
LEO	Law Enforcement Officer

MA	Marchman Act
MAT	Medication-assisted Treatment
MBHC	Meridian Behavioral Healthcare
MH	Mental Health
MHC	Mental Health Court
MHFA	Mental Health First Aid
MOU	Memorandum of Understanding
MRT	Mobile Response Team
NA	Narcotics Anonymous
NAMI	National Alliance on Mental Illness
NFRMC	North Florida Regional Medical Center
NGRI	Not Guilty by Reason of Insanity
ORAS	Ohio Risk Assessment System (series of screening tools)
PDO	Public Defender's Office
PSCC	Public Safety Coordinating Council
PSH	Permanent Supportive Housing
PTR	Pretrial Release
RIA	Florida Pretrial Risk Assessment
SAO	State Attorney's Office
SIM	Sequential Intercept Mapping
SMI	Serious Mental Illness
SUD	Substance Use Disorder
TBI	Traumatic Brain Injury
UF	University of Florida Health
UFCWC	University of Florida Counseling and Wellness Center
UFPD	University of Florida Police Department
USF	University of South Florida
VA	U.S. Department of Veterans Affairs
VTC	Veteran's Treatment Court

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Alachua County, Florida: Transforming Services for Persons with Mental Illness and Substance Use Disorders in Contact with the Criminal Justice System

Introduction

This report provides a summary of the *Sequential Intercept Mapping* (SIM) convened virtually on January 19-20, 2022. The SIM provided a strategic plan for a targeted population, namely adults with mental health and/or substance use disorders involved in the criminal justice system in Alachua County, FL. The SIM is an integrated community planning tool that can facilitate collaboration related to behavioral healthcare, reducing homelessness, and diversion from the criminal justice system.

This report includes:

- A brief review of the background for the SIM
- A summary of the information gathered at the SIM, presented by intercept
- A sequential intercept map developed with input from participants during the SIM
- An action planning matrix (priorities in rank order) developed by the participants
- Recommendations to assist Alachua County in achieving their goals

Background

The Criminal Justice, Mental Health and Substance Abuse Technical Assistance Center (CJMHSA TAC) provides training and technical assistance consultation to grantees of the Department of Children and Families CJMHSA Reinvestment Grant Program. This SIM was conducted as a technical assistance request from grantee Meridian Behavioral Healthcare. The SIM will serve to inform expansion of the reinvestment grant program in Alachua County and present updated priorities of focus for Alachua County, as the last Alachua County SIM was conducted in 2016. The SIM provided Alachua County with the products listed below:

- Creation of a map of the current criminal justice system indicating points of "interception" where jail diversion strategies and programs for individuals with mental health and/or substance use disorders can be developed and implemented
- Identification of resources, gaps in services, and opportunities within the existing behavioral healthcare system, law enforcement, and the judicial system
- Development of a strategic action plan to implement identified priorities that address criminal justice diversion, reentry, and treatment needs of adults (18+) with mental health and/or substance use disorders involved with the criminal justice system

The Alachua County SIM mapping was comprised of 38 participants representing cross-systems stakeholders including county commission, court services, law enforcement, mental health and substance use treatment providers, human services, corrections, advocates, and peers. A complete list of participants is available in Appendix A at the end of this report. Abby Shockley and Katelind Melendez representing the University of South Florida (USF) CJMHSA TAC facilitated the mapping. Stuart Wegener and Amy Weber of Alachua County Court Services and Jeremiah Alberico representing grantee Meridian Behavioral Healthcare organized the logistics of the mapping.

Prior to the SIM, invitees were given the opportunity to provide anonymous feedback regarding the perceived strengths and opportunities for Alachua County's behavioral health and justice system for adults with mental health, substance use, and/or co-occurring disorders. This feedback was integrated into the SIM and validated by priorities identified in the Action Plan (Figure 1).

Figure 1.
Alachua County Strengths Word Cloud

Objectives of the Sequential Intercept Mapping

The SIM is based on the Sequential Intercept Model developed by Patricia Griffin, Ph.D. and Mark Munetz, MD for the National GAINS Center for Behavioral Health and Justice Transformation funded by the Substance Abuse and Behavioral Health Services Administration (SAMHSA). During the mapping, the facilitators guided participants to identify resources, gaps in services, and opportunities at each of the six distinct intercept points of the criminal justice system.

The SIM has three primary objectives:

- Development of a comprehensive map of how people with substance use and mental health disorders (SAMH) disorders flow through six distinct intercept points of the Alachua County criminal justice system: Community Services, Law Enforcement and Emergency Services, Initial Detention and First Appearance, Jails and Courts, Reentry, and Community Corrections.
- Identification of resources, gaps in services, and diversion opportunities at each intercept for adult individuals (18+) with substance use and/or mental health disorders involved in or at risk of becoming involved in the criminal justice system (target population).
- Development of priorities to improve the system and service-level responses for individuals in the target population.

The Alachua County SIM map is on page 37 of this report.

Keys to Success

Existing Cross-Systems Partnerships

Alachua County's history of community collaboration between the behavioral healthcare and criminal justice systems is reflected in several existing local efforts that were identified prior to and during the SIM:

- Alachua-Bradford CJMSHA Planning Committee
- Alachua Justice Mental Health Collaboration Program (JMHCP) Grant Program Committee Teams
    - JMHCP Coordination Team
    - Subcommittee on Oversight to the Alachua County Public Safety Coordinating Council (PSCC)
- Medical Advisory Committee Meeting
- Healthcare Advisory Board

Representation from Key Decision Makers

The SIM included broad, cross-systems representation and key decision-makers. Opening remarks by Alachua County Commissioner Marihelen Wheeler and Stuart Wegener, Criminal Justice Liaison, Court Services set the stage and established a clear message as to the importance of the mapping and the county's commitment to an action plan.

Alachua County Data Collection

The SIM opened with a presentation on the general SIM process and history, as well as a brief review of existing Alachua County data that contributes to understanding the needs and risk/protective factors associated with the target population. Prior to the mapping, the community pulled extensive key indicator data that the TAC reviewed and utilized to inform discussions and drive conversations throughout the process. This data collection helps SIM facilitators to dedicate time during the mapping to validate information and explore the trends behind key indicators. Alachua County has access to a robust amount of data related to key criminal justice and behavioral health indicators.

It is also important to note that during the SIM, the TAC captured information on current processes but also made recommendations for the transition to a new contracted jail healthcare provider. In February 2022, Wellpath will begin providing primary and mental healthcare services in the Alachua County Jail. Thus, the importance of using existing information available to inform data-driven decision making and ongoing data review was discussed. Alachua County's commitment to doing so is evident through prioritization of data and information sharing in their action plan below.

Alachua County Sequential Intercept Map Narrative

This narrative reflects information gathered during the one-day modified mapping and often verbatim from the participants or local experts. This narrative is a reference guide to navigate the Alachua County SIM map, especially with regard to acronyms used on the map. All data presented in the narrative represents the 6-month time frame, 4/1/2021-9/30/2021, unless otherwise noted.

Intercept 0—Community Services

Prevention Efforts

211 operated by United Way of North Central Florida

- Serves Alachua, Bradford, Dixie, Gilchrist, Levy and Union Counties
  - United Way of NCF is served by Broward United Way call takers.
- 211 is a 24-hours-a-day, 7-days-a-week, information and support line for individuals to get information about financial assistance, health programs, and crisis support.
- Individuals can access 211 by phone, email, chat or text (just text your zip code to 898-211).
- Call takers may provide some initial de-escalation however will connect callers to the Alachua County Crisis Center if additional support or intervention is needed.

Alachua County Crisis Center (ACCC)

- The Alachua County Crisis Center (ACCC) provides 24 hour a day crisis and suicide intervention phone counseling to Alachua County residents (crisis line: 352-264-6789). Prevention and early intervention is the major focus of ACCC. The ACCC operates the suicide prevention line, is the county lead in the shift to 988, as well as serves a veterans crisis line back-up center.
  - 911 provides a warm hand-off (connects callers) to ACCC hotline.
  - The ACCC received 24,071 crisis calls yearly (encompassing all calls received by the ACCC).
- The ACCC operates on a hybrid staff model of staff and volunteers.
  - At the time of the mapping, there were approximately 100 volunteers. ACCC is in the process of hiring peers and recruiting volunteers that identify as peers. There is consistency in the volunteer pool with a history of 40+ years. In general, volunteers complete 7 weeks of training and are vigorously screened. The volunteer training model has been shared nationwide.
- ACCC provides an array of services:
  - The *crisis line* is a 24-hour crisis intervention and counseling service. The call line is staffed by volunteers under supervision of crisis center staff. Volunteers complete a rigorous 60-hour training program and a 1–3-month probationary period.
  - The *Mobile Response Teams (MRT)* are available 24 hours a day and provides behavioral health crisis intervention services in the community. The MRT often responds in collaboration with law enforcement. There are two MRTs:
    - Supported by LSF funding, one of the MRTS serves youth and young adults.
      - The MRT served 166 clients, treated 100% of clients, with 5% repeat calls for service.
    - Additionally, the ACCC has an MRT that serves adults of all ages. There is capacity to staff as many MRTs as needed due to volunteer capacity. The team is comprised of licensed staff and highly trained crisis intervention

volunteers. The team dispatched is determined based on the call.
    - The *Care Team* is an emergency mobile outreach team comprised of volunteers to respond to individuals in crisis upon request from law enforcement, mental health providers, or family members. Some common reasons for care team dispatch are traumatic deaths and death notifications.
    - ACCC provides *crisis counseling* Monday- Friday between 8:30 a.m. and 5:00 p.m. for both appointments and walk-ins. Through a relationship with the University of Florida counseling program, services are staffed by graduate level practicum (6-8 students) and interns, adjunct counselors who are post master's level seeking experience toward licensure and the center's clinical staff.
    - The *Survivors of Suicide Support Group* meets monthly at the ACCC. Services are provided by staff, volunteers, and survivors.
    - Additionally, the ACCC provides community education, a coordinated community trauma response, and rumor control.
- ACCC supports and participates in Crisis Intervention Teams (CIT) training and serves on the CIT Coordinating Council.

Meridian Behavioral Healthcare (MBHC)

- MBHC conducts outreach at community events and within the school system to promote awareness, early intervention, and access to care information.
- Meridian provides crisis intervention services at the elementary, middle, and high schools in Alachua County.

University of Florida Counseling and Wellness Center (UFCWC)

- The University of Florida Counseling and Wellness Center is a Bureau of Justice Assistance Police Mental Health Collaboration learning site. The UFCWC operates a behavioral health consultation team, which is a multidisciplinary team with the police department and counseling center. The UFCWC works closely with the University of Florida Police Department as well as the ACCC to serve off-campus students in crisis.

VA Veterans Crisis Line

- To reach the Veterans Crisis Line:
    - Call 1-800-273-8255 press 1
    - Visit VeteransCrisisLine.net
    - Text to 838255
- Veterans will be connected immediately with a representative and follow-up call is conducted by a suicide prevention coordinator. Progress notes are written in the medical record, and providers are alerted to notes to help address their presenting issues and help them engage in care.

Crisis Services

Mobile Response Teams operated by ACCC

- There are two mobile response teams (see additional details under ACCC).

Alachua County Access Center operated by Meridian Behavioral Healthcare

- The Access Center operates on the basis of 7:30 AM to 6 PM, Monday through Friday. Outside of this time frame, the lines are transferred to Emergency Screening/Support staffed by clinicians. This ensures a full 24 hours-a-day, 7 days-a-week, and 365 days-a-year coverage.
    - The Access Center receives 6,500 – 7,000 walk-ins a year, on average.
- The Access Center is a certified suicide hotline.
- There are 9 bachelor's level staff working towards their master's overseen by a licensed

clinical social worder. There has been increased utilization of telehealth.

- Meridian has crisis lines available 24/7 to assist citizens in need of support through direct counseling, referral, law enforcement wellness checks and/or Mobile Response team of ACCC.
    - MBHC works collaboratively accepting handoffs from ACCC when inpatient level of mental health care or detoxification services are indicated. MBHC also refers to ACCC MRT services and/or law enforcement for wellness checks.

Co-Responder Teams (CRT) in partnership with Alachua County Sheriff's Office, Gainesville Police Department and Meridian Behavioral Healthcare (Intercept 1 presents CRT data and additional information.)

- CRTs pair law enforcement officers trained in Crisis Intervention Teams (CIT) training and master's level mental health clinicians in responding to calls for individuals in crisis (such as wellbeing checks, suicide attempts, and mental health crisis calls). Community members may call to request CRTs and CRTs may also self-assign based on incoming 911 call data. Clinicians are in the vehicle with law enforcement officers 40 hours-a-week. There are currently six teams in Alachua County, with plans to increase operations to seven teams.
- MBHC also conducts street outreach and maintains a presence at Grace Marketplace to assist those who may be at risk of or can be diverted from activities leading to arrest when indicators of, or early signs of Mental Health and Substance Abuse issues, are present.

Community Supports

NAMI

- NAMI provides educational and support groups at no cost. Programs include peer-to-peer, family-to-family, and classes for parents and grandparents of individuals with mental illness. The programs are 8 weeks long. NAMI no longer operates a crisis line and refers to ACCC and Meridian. The NAMI Gainesville business phone line is (352) 949-6925 and operational Monday – Friday, 8:00 a.m.- 5:00 p.m.
- The National NAMI text line is 741741.

Gainesville Opportunity Center (Intercepts 0 & 5)

- The GOC is a clubhouse model, drop-in center that promotes a meaningful workday funded by DCF.
    - At the time of the mapping, the GOC was seeing 20 members daily, with capacity to see up to 30-35 members daily.
- The GOC provides support for job placement, employment readiness, job coaching and has a collaborative partnership with employers.
- The GOC assists members in securing transitional employment. Employers allow GOC to fill positions and work with members on the job until they can work independently and connect the member to a more permanent employment position.
- Referrals for GOC may include Meridian, UF Health/Shands, VA, FACT Team, independent counselors. Meridian case managers make connections for those reentering from jail. GOC is currently serving a cohort of members with criminal justice backgrounds.

Strengths

- There is strong MRT training capacity, and a history of community supports through the ACCC. There is an opportunity to share the volunteer training model/approach statewide.
- Meridian has capacity to provide telehealth services to community members, including distributing tablets for those with connectivity issues.

Opportunities for Improvement

- There may be potential for consumer confusion. It would be beneficial to coordinate the crisis response services and there is an opportunity for 988 to provide clarity.
- Consider requesting NAMI data regarding referral sources to ensure promotion of online courses.
    - NAMI expressed interest in providing GPD and ACSO with education and support group resources to disseminate to community members.

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Intercept 1—Law Enforcement & Emergency Services

Emergency Services and 911

911 / Alachua County Combined Operations Center operated by Alachua County Sheriff's Office (ACSO)

- If an individual is experiencing an apparent behavioral health crisis, 911 is the first point of emergency contact and system response. Alachua County has a Smart 911 call system. Medical and health information may be provided to responders before they arrive to the scene.
    - 911 dispatchers ask a series of questions to identify mental health concerns, medication, and treatment status.
- Community members call to request CIT officers and Co-responder Teams (CRTs).
    - CRTs are on a self-assign basis and triage calls based on priority. The CRTs consider prior contacts, type of call (assist vs. suicide), and if there is a weapon involved.
    - CRTs review pending calls and decide which call to go to based on notes collected by dispatcher. CRT data is presented in Table 2.
- In the past 6 months (April 1 – September 30, 2021), there were a total of 642 mental health crisis calls and 505 incidents (see Table 1). There are three types of incidents:
    - Baker Act and Marchman Act: 428 incidents
    - Suicide Attempt/Threats: 63 incidents
    - Mental Health Crisis: 14 incidents

Table 1.
Alachua County Combined Operations Center Call Data

Law Enforcement Agency	MH Crisis Calls Handled by LEO (count)	MH Crisis Calls Handled by CIT Trained LEO (%)
ACSO	517*	43%
GPD	124	-
Total # Calls	641	-

Both ACSO and GPD 911 call data is also reflected in Table 2. CRT data.
**dispatched officer and CRT*

Co-Responder Teams (CRT) in partnership with Alachua County Sheriff's Office, Gainesville Police Department (GPD) and Meridian Behavioral Healthcare (see Intercept 1 for CRT data and additional information)

- CRTs pair law enforcement officers trained in Crisis Intervention Teams (CIT) training and master's level mental health clinicians in responding to calls for individuals in crisis (such as wellbeing checks, suicide attempts, and mental health crisis calls). Community members may call to request CRTs and CRTs may also self-assign based on incoming 911 call data. Clinicians from Meridian are in the vehicle with law enforcement officers 40 hours-a-week. There are currently six teams in Alachua County, with plans to increase operations to seven teams (1 CRT is supported by JMHCP).
    - ACSO is implementing a sixth CRT, its second one.
    - GPD has a total of four teams. They operate Monday-Thursday 7:00 a.m.-5:00 p.m.; Monday-Thursday 12:00 p.m.-10:00 p.m.; Wednesday-Saturday 9:00 a.m.-7:00 p.m.; and Thursday-Sunday 7:00 a.m.-5:00 p.m.
    - University of Florida Police Department (UFPD) has established a new Behavioral Health Unit, the plans for which include an additional CRT to make the total of seven in the County.

Table 2.
Co-Responder Team Data

Month	# of Operational CRTS	# of Contacts	Duplicate Contacts	Total diversions	BA diversions	Jail diversions	ED diversions
April 2021	2	79	-	20	16	4	-
May 2021	2	96	-	40	26	14	-
June 2021	2	82	-	42	26	16	-
July 2021	3	99	-	56	26	15	-
August 2021	5	165	-	92	37	38	17
September 2021	5	125	8	77	39	25	13
Total March to September 2021	**-**	**739**	**8**	**358**	**189**	**124**	**45**

Table 3.
Emergency Medical Services Call Data

	Gainesville Fire Rescue # calls*	Alachua County Fire Rescue # calls
OD/poisoning calls	410	437
BH/Suicide attempt calls	46	536

**City of Gainesville Paramedicine Program*

Law Enforcement

Crisis Intervention Teams (CIT) Training

- There are three 40-hour Memphis Model CIT trainings a year for law enforcement officers, 911 dispatch, and jail personnel. The last training was in late 2021.

Table 4.
Summary of CIT Trained Officers

Law Enforcement Agency	% of Officers Trained
Alachua County Sheriff's Office (ACSO)	44%
Gainesville Police Department (GPD)	42%

Alachua County Sheriff's Office (ACSO)

- ACSO administration personnel (911 dispatch) are 100% CIT trained (not included in Table 4).

City of Gainesville Police Department (GPD)

- GPD police chief is working towards 100% CIT-trained officers.
- Currently, GPD new hire officers participate in a mini-academy that includes 8 hours of Mental Health First Aid Training. Following the three-month field training, they are offered CIT training. They accept officers on a volunteer basis and then command staff determine who will attend.
- An advanced CIT training course was created however, COVID-19 has created some delays in training.

Mental Health First Aid (MHFA)

- Alachua County and the City of Gainesville have offered extensive MHFA training (2,330 public employees, judicial employees, etc.). Previously, the City of Gainesville trained 1000+ personnel. Meridian delivers curriculum for both entities.

Additional municipalities include City of Alachua Police Department, City of High Springs Police Department, Santa Fe College Police Department, and The University of Florida Police Department

Crisis Services

Table 5.
Emergency Department Admissions for Psychiatric Reasons

Hospital	# Admissions	Average Length of Stay
Malcolm Randall VA	445	5 hrs., 48 mins.
UF Health	N/A	N/A
NFRMC	N/A	N/A

Baker Act

- When law enforcement arrives to the scene of an incident, the officer must determine if the individual in crisis appears to meet the criteria for involuntary examination in accordance with the Baker Act (Chapter 394, F.S.) or Marchman Act (Chapter 397, F.S.). This is often at the discretion of the officer. The use of handcuffs for Baker Act transports is up to the discretion of the officer (this is the policy for both ACSO and GPD).
    - The CRT does not make any arrests. The goal is to divert from jail.
    - Co responder teams have access to laptop with air cards. They can also access relevant data and information from the real time electronic health record to assist in the co-responder intervention. This applies if the clients are Meridian clients. It can also apply to a veteran, particularly if he or she had previous involvement with MBHC or if not, a new record can be opened up during the intervention.
    - If an individual meets the criteria for an involuntary Baker Act examination and has *not committed a law violation*, the law enforcement officer (both ACSO and GPD) will transport the individual to appropriate Baker Act receiving facility based on Behavioral Health Transportation Plan, an individual's preference, and insurance coverage.
    - If an individual meets the criteria for an involuntary Baker Act examination and *has committed a law violation* or a *misdemeanor offense*, it is up to the discretion of the officer to transport that individual to Alachua County Jail to be booked or transport to appropriate Baker Act receiving facility.
    - If an individual meets the criteria for an involuntary Baker Act examination and has committed a *felony offense*, the individual is transported to the Alachua County Jail and the arrest document will have a note about the mental health problems identified by the CRT.
    - If an individual has committed a violent offense, but does not meet Baker Act criteria, the person is transported to the Alachua County Jail or a Notice to Appear or sworn complaint is completed.
- According to the Baker Act Reporting Center (2020), there were 2,221 involuntary examinations for Alachua County residents (535 of these exams were for children) in FY2018-19.

Baker Act / Marchman Act Transport

According to the *Alachua County Behavioral Health Transportation Plan 2020-2023*, law enforcement agencies in Alachua County transport adults as follows:

- Non-Veterans on an involuntary Baker Act to one of the following three facilities:
    - Meridian Behavioral Healthcare, Inc./CSU
    - UF Health Psychiatric Hospital
    - Behavioral Health Center of North Florida Regional Medical Center (NFRMC)
- Non-Veterans on an involuntary Marchman Act to one of the following facilities:
    - UF Health Psychiatric Hospital Addictions Receiving Facility
    - Meridian Behavioral Healthcare, Inc. Addictions Receiving Facility
- Individuals who are Veterans on a Baker Act may be transported to the Malcolm Randall VA Medical Center in Gainesville, or to one of the following facilities:
    - Meridian Behavioral Healthcare, Inc./CSU
    - UF Health Psychiatric Hospital
    - Behavioral Health Center of North Florida Regional Medical Center
- Individuals who are Veterans on a Marchman Act may be transported to Meridian Behavioral Healthcare, Inc. Addictions Receiving Facility or to acute care at UF Health Shands Hospital.

Table 6.
Crisis Unit Admissions (Baker Act & Marchman Act)

Hospital	# Admissions	Transported by LE (as %)	LE Average Wait Time
Malcolm Randall VA	15	.001%	4 hrs., 38 mins.
UF Health Psychiatric	1,631	11.5%	<15 mins, most 10-15 mins.
North Florida Regional Medical Center	N/A	N/A	N/A
Meridian	1,512	44%	8 mins.
TOTAL	**3,158**	**-**	**-**

Crisis & Detoxification Services

Meridian Behavioral Healthcare Crisis Stabilization Unit (CSU) & Addictions Receiving Facility (ARF)

- The CSU has 50 beds (38 adult beds; 20 children's beds). The 38 adult beds are jointly designated adult and youth by DCF.
    - At the time of the mapping, the CSU readmission rate was 11%.
    - The CSU has a full continuum of care post-discharge. Discharge planning begins at admission to the CSU and coordinates with family and others.
    - If an individual does not have a place to go following release from the CSU, they may be housed at the Meridian Lodge – contingent on available funding and if the person to be served has the ability to function independently. The Lodge is a 39-bed motel adjacent to the Meridian campus that provides respite and connections to assistance including securing housing, employment, and Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) groups.
- The ARF is a secure 12-bed unit for adults.
    - The CSU is adjusted to manage additional ARF beds if ARF is at capacity.
    - The ARF provides induction for Medication-Assisted Treatment (MAT) using Methadone, Vivitrol, and Buprenorphine (Suboxone).
    - Those discharged from the ARF are prioritized for Meridian's 66-bed co-occurring capable residential program. If an individual is not eligible for the residential program, they will be referred to the Meridian MAT clinics. There are MAT clinics in Alachua and Levy Counties.

UF Health Psychiatric Hospital CSU & ARF

- UF Health CSU/CCSU has 63 beds (48-bed CSU for adults and a 15-bed CCSU for children).
- The ARF is a secure 18-bed unit for adults.

Behavioral Health Center of North Florida Regional Medical Center (NFRMC)

- The NFRMC CSU is a 33-bed adult unit.

Malcom Randall VA Medical Center

- Veterans who require a Baker Act examination may be transported to the VA.
- The VA has an inpatient psychiatric unit/CSU with 48 beds for eligible veterans.

- Stabilization and treatment for acute psychiatric conditions and SU disorders are provided, along with medical detox and MAT services.
- Referral for further inpatient treatment for SU or psychiatric conditions is available, and transfer to other facilities for treatment like VA residential SUD programs.
- Discharge planning begins at admission, and care coordination with family members and patient's outpatient providers is also made available.
- If bed capacity is reached, veterans are transferred to other facilities for care.

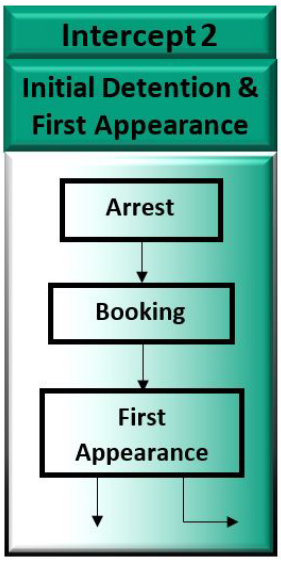
Strengths

- There is a strong collaborative relationship between mental health providers and law enforcement in Alachua County, as indicated by the seven CRTs.
- CIT training is a priority for law enforcement agencies in Alachua County and for the County itself.
- 100% of incoming GPD officers are trained in MHFA.
- MHFA training for employees is a priority for Alachua County and the City of Gainesville.
- There is a coordinated receiving system which is operational and functions in accordance with the County's current Behavioral Health Transportation Plan.
- There are ongoing efforts to establish a central receiving system in Alachua County.

Opportunities for Improvement

- Follow up on Smart 911 and determine if it may be leveraged for CRTs, if this is not being done currently.
- CRTs are not operational 24/7 and overnight coverage between 12 a.m. and 6 a.m. is limited.
- Continue to pursue opportunities to engage NFRMC in data conversations and planning meetings.
- Discuss veteran specific needs such as VA and emergency room access and connecting to appropriate treatment services based on veterans' insurance coverage.
- Standardize screening approach to determine veteran status.
- Look at opportunities to use Meridian's Lodge to its fullest extent for those in need of respite and safe housing while awaiting treatment.

Intercept 2—Initial Detention & First Appearance



Alachua County Jail Booking

Booking and Intake

- The booking screening is conducted by a licensed practical nurse or registered nurse within 4 hours. Screening tools administered include:
  - Brief Jail Mental Health Screen (BJMHS), implemented in October 2021 as part of BJA JMHCP grant and Stepping Up Initiative
- Intake process is not in-depth. Individuals must self-disclose mental health and substance use problems. Jail medical provider conducts follow-up with more specific questions if individual indicates MH/SUD problems.
- For individuals who come to the jail on psychotropic medications, those medications are continued (if confirmed) and there are bridge orders to avoid gaps in medications. If individuals come from the state hospital on medications that are not on formulary, the jail will try to keep them on it.
- At the time of the mapping, Corizon Health was the jail medical provider. Wellpath's contract to provide correctional healthcare (both primary and mental health) services began in February 2022.
  - Corizon Health utilized manual input but there are plans in place to update to electronic input. Corizon conducts brief screening (in-house tool) to determine mental health and substance use needs and refer to services based on individual needs. The screening includes questions related to trauma and veteran status.
    - If identified as a veteran, individuals are connected to the VA for additional screening. A barrier to services for veterans is sex offender status.
  - Wellpath will have at least 2 prescribers, a full-time ARNP, a part-time psychiatrist, two master's level practitioners, mental health technicians, and one mental health counselor to deliver services.
- At the time of the mapping, there were plans for Wellpath to review booking and screening tools to validated/evidence-based tools upon contract execution in February.
- Mental health or medical information is provided to the Public Defender for those individuals who are in need of immediate release. The PD is not currently informed of jail booking screening.

Table 7.
Summary of Jail Booking & Screening Data

	Total #	# Positive Screened
Jail Bookings	2,766	-
Jail Mental Health Screenings	3,189	937
Jail Substance Use Screenings	3,189	955

Pretrial Release (PTR)

- Following arrest, PTR staff meet with inmates at the jail to conduct interview and determine if the detainee meets the criteria for the mental health treatment program. The Florida Pretrial Risk Assessment (RIA) is conducted to determine the individual's likelihood to return to court or reoffend. This information and risk assessment is then shared with the judge at the First Appearance Hearing. PTR does not inform Corizon assessment. A Pretrial Officer asks the defendant if he or she have or has had any substance, alcohol or mental health needs during their interview.

Table 8.
Summary of Pretrial Release Data

	% Released
Pretrial Release Rate of All Arrestees	60%
Pretrial Release Rate of All Arrestees with MH Disorders	43%

First Appearance

- The first appearance hearing occurs within 24 hours of arrest.
- The judge receives PTR risk assessment results.

Centralized Screening Team (CST)

- The CST is operated by the Department of Court Services and screens detainees who remain in custody after First Appearance. The CST screens individuals using within 96 hours of First Appearance. In collaboration with the jail, the judiciary, and treatment partners, staff develop and propose release plans to manage low-risk offenders on community-based supervision, determine if they are eligible for any programs or problem-solving courts. CST staff provide release options to the PD or private attorney to be used at a bond reduction hearing. Individuals with mental health and substance use problems are eligible.

Strengths

- Alachua County Jail is currently following best practice through use of BJMHS at booking.
- Alachua County has the opportunity to leverage conversations with new jail healthcare provider about use of validated screening tools.
- CST is utilizing validated screening tool.
- Court Services assists judiciary in decisions regarding defendants. CST serves as a safety net to address those eligible for programming that were not identified prior to First Appearance

Opportunities for Improvement

- There is an opportunity for PTR to review booking medical and mental health screening to not conduct duplicative screenings or add to their workload.
- There is an opportunity to implement validated substance use screening tool with new jail healthcare provider. Two recommended screening tools specific to SUD that will complement the BJMHS: AUDIT, DAST.
- There is informal communication and data sharing between jail booking staff, PTR, and

First Appearance judiciary. This provides an opportunity to formalize these relationships with memorandums of understanding (MOUs) to promote/share information for diversion opportunities beyond PTR risk assessment and to ensure these relationships live within the position and not among people, should there be personnel turnover.

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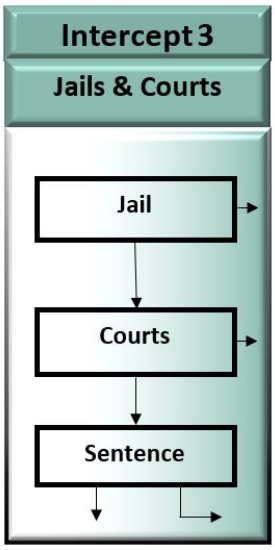
Intercept 3—Jails & Courts



Alachua County Jail

(Intercept 2 presents the jail booking and intake information)

- The population at the time of the mapping (1/19/2022) was 843 inmates, with a capacity of 1,148.
- The average length of stay for the sentenced population (336, representing 40% of the total inmates) is 125 days.
- For individuals with mental health problems (295 or 35% of the inmate population), the average length of stay is 149 days.

Jail Population Management (JPM)

- A dedicated Court Services staff member evaluates persons in custody at the Jail who are referred by Jail staff, Court Services program staff or attorney(s). The purpose is to assess the individual for alternative placement in the community, provided that there are release options possible with community supervision, and capacity within the community for services, etc. A considerable number of individuals served have significant mental health needs, are developmentally disabled and have chronic medical issues.

In-Jail Medical Services

- At the time of the mapping, Corizon Health was the jail medical provider. Wellpath's contract to provide correctional healthcare (both primary and mental health) services began in February 2022.
    - Wellpath will have at least 2 prescribers, a full-time ARNP, part-time psychiatrist, two master's level practitioners, mental health technicians, and one mental health counselor to deliver services.

Mental Health Pod / Mental Health Step-down Pod

- The mental health pod has dedicated staff, including a caseworker. Mental health staff regularly see inmates at the pod and are connected with peers. Mental health staff, the classification caseworker and security staff are also assigned to the pod and meet daily to review with inmates any updates, including changes in behavior, etc. Psychiatric services are provided by Corizon staff.
- Wellpath will have at least two prescribers

In-Jail Programs

Individuals in jail may voluntarily sign-up for available programming. They must be in minimum/medium custody to be eligible to participate. If an individual is housed in the Mental Health Pod, they may not qualify for general population programming. All classes/programs are gender specific. All programs were suspended between August 20 and September 30, 2021 and beyond due to COVID.

Mental Health and Substance Use Programming facilitated by Meridian

- The SUD programming focuses on underlying causes of addiction and serves males and females. For the period, April 1 – August 16, 2021, approximately 25 males and 24 females were served. Outreach is provided by CJMHSAG Meridian staff who provide up to two sessions for individuals in jail (limitations to program curriculum because facility is secure). When detainees are interested in diversion services, detainees are screened by MBHC care coordinators, peer specialists and/or clinicians. These distribute contact information

including business cards with appointment times for follow-up upon release. Forensic Care coordinators also assist with overcoming barriers such as the need for accessing psychiatric medication appointments, linkage to basic needs and other resources identified on the GAINS reentry checklist. Individuals are given business cards for follow-up upon release. If follow up is requested which does not happen a lot, screens and referrals are provided, as well as connection to treatment and 12 step resources.

- Motivational interviewing, trauma informed assessment, relapse planning based on Living in Balance are also provided.
- The programming is led by a Certified Recovery Peer Specialist with the Forensics endorsement. Peer support is based on Wellness, Recovery Action Planning (WRAP), GAINS Re-entry check list. Psychoeducational groups, peer specialists, care coordinators are master's level or licensed professionals.

VA Orientation Group

- VA orientation groups are convened weekly and help veterans learn how to get established with the VA and provide information about programs. The jail program manager helps individuals to sign up for VA programming and a peer support specialist works with the VA substance use disorder treatment team and conducts jail in-reach.
- The Veteran Justice Outreach provides information and linkage to VA services to vets involved in the criminal justice system. Prior to release from jail, referrals are initiated for access to housing, substance use, mental health, and other VA services.

Mental Health Classes

- Mental health classes are conducted on Friday afternoons. Classes are NAMI-influenced.

Alcoholics Anonymous (AA)

- AA classes were provided to 22 males during the period April 1-August 16, 2021, but the female-focused sessions were not activated due to COVID among instructors.

Narcotics Anonymous (NA)

- NA classes were provided to 15 females during the period April 1-August 16, 2021. NA classes were provided to 12 males between May 11 and August 13.

Work Release Program

- Alachua County Court Services operates a Work Release program for those who are yet to be released from jail but are supervised while they are working in the community. The program has a total capacity of approximately 60-65, however due to COVID, there has been a significant reduction in the census. May be referred to work release by CST.
- When residents are in the program, they participate in NA/AA meetings as well as life skills groups, separate from in-jail programs. If anything related to MH, may refer out to services. If an individual is in work release program, and screens for MH normally do not qualify for work release program
- Each Work Release participant is assisted to obtain placement in a job, a program requirement. For those with substance use issues, there is a screening and assessment for participants conducted by Court Services' OPUS Outpatient Treatment Program. Those who qualify for outpatient treatment based on eligibility do participate in OPUS.
- Individuals with untreated mental illness or serious persistent mental illness may not be a good fit for the Work Release Program, but it is not a disqualifier.

Table 9.
Work Release Average Program Participation

April	May	June	July	August	September
14	11	14	18	25	22

Courts

Table 10.
Summary of Caseloads

	# Cases	% cases defendants were evaluated for adjudicative competence
Misdemeanor	2,184	1.1%
Felony	1,983	2.27%
Total	**4,167**	**1.66%**

Problem-Solving Courts

The State Attorney's Office (SAO) is responsible for screening for all problem-solving court programs, violent behavior/crimes may be ineligible. The problem-solving court programs are voluntary and not many individuals want to enroll in programs due to the duration unless they are interested in having their charges dropped (except post-plea). Sanctions are built into the program such as adding participation in support groups (AA/NA), community service, and time spent in jail (3-5 days). If participants complete the program/graduate, their charges are dropped, but if they do not complete the program, they must finish their sentence. There are not many repeat clients but that occurs occasionally.
Each of the problem-solving courts has case managers employed by Court Services. A Meridian clinician also serves Mental Health Court (MHC). Veterans Treatment Court is connected to the VA. The Drug Court and OPUS program are also staffed by Meridian clinicians. Metamorphosis residential treatment program operated by Court Services is an option for all problem-solving court participants at end of continuum. It is for those participants who have exhausted other treatment options (outpatient, short-term residential). It is a therapeutic community program, lasting between eight months up to a year. The program primarily provides substance use treatment services but will accept individuals with co-occurring disorders. Court services is in discussions with LSF Health Systems to explore the feasibility of engaging peers in the Meta program.

Mental Health Court (MHC)

- The MHC is a voluntary, treatment-based diversion court serving defendants with mental illness and developmental disabilities. The MHC provides the least restrictive treatment, training, and support services necessary to reduce recidivism and ensure public safety.
- To be eligible for the MHC, participants must have an arrest for a qualifying 3rd degree felony and/or non-violent misdemeanor or criminal traffic offenses, with some exceptions, pretrial diversion option is available. Approval by the State Attorney's Office is required.

- The MHC served 26 participants during the period 4/1/2021-9/30/2021 with the capacity to serve 60.
- Services include case management, mental health and substance use treatment, and referral to psychiatric services.
- The duration of court participation varies between 9-15 months.

Adult Drug Court

- To be eligible for drug court, State Attorney approval is required for pretrial diversion option, with successful completion leading to dismissal of felony charges. The post-plea option is available to those who don't qualify for charges being dismissed, because of prior felony convictions.
- The Drug Court served 30 client participants during the six-month period of 4/1/2021-9/30/2021 with the capacity to serve 75 participants. During the last 6 months, services have been provided to 47 clients.
- Services include intensive supervision, case management, and treatment to eligible participants. 12-month minimum participation is required.

Veteran's Treatment Court (VTC)

- The VTC is a voluntary treatment-based diversion court serving veterans with mental health or substance use disorders charged with certain misdemeanor and felony offenses. The court must collaborate with VA for eligibility and State Attorney's Office agreement is required.
- The VTC was serving 13 participants during the period 4/1/2021-9/30/2021. This court has the capacity to serve 60 participants. Over the last six months, VTC served 13 client participants.
- Services include treatment, counseling, supportive housing and VA supports. Peers support VTC occasionally.
- The VA Veterans Justice Outreach Specialist helps staff those vets whose cases fall under the VTC.

Felony Forensic Court (F.S. 916 ITP/NGRI)

- Felony Forensic Court serves felony defendants who are incompetent to proceed. The court is a partnership between the Judicial Circuit, Alachua County, the State Attorney's Office, Public Defender's Office, courts, private attorney, and treatment providers.
- The current census for this Court is 195 FS 916 clients, who are now being tracked by Meridian Forensics Team. 91 (47%) of this census are from Alachua County. In addition, 8 Division V clients who are on probation are being served.
- The staff member assigned to this Court has recently moved to another agency, however efforts are being made to fill this vital position.

Additional Programs

Meridian Forensic Program (supported by CJMHSA Reinvestment Grant & Alachua County matching funds)

- The Meridian Forensic Program provides an array of services including assessment, case management, mental health and substance use disorder treatment, emergency housing, transportation vouchers, access to peer specialists (three .5 FTE), benefits coordination and representation in court.
    - Peers support MHC clients, one attends court and case staffings, lead peer-run groups on Thursday and Friday, have ability to do WRAP planning, and engage on a case-by-case basis.

- Those eligible for the program are adults with a mental illness, substance use and/or co-occurring disorders who are in or at risk of entering the criminal justice system. The target population includes individuals with chronic MI who have misdemeanor charges and have been declared ITP, or do not meet criteria for MH Court, or have high arrest recidivism rates; individuals with chronic MI who have been judicially determined to have been restored to competency and are released to the community; and individuals identified as "high utilizers" of the jail and acute services.
- The goal of the program is to serve 990 individuals over three years. At the time of the mapping the monthly caseload was approximately 155 clients.

Court Services' OPUS Outpatient Treatment Program

- OPUS is an outpatient, substance use treatment program that provides a full range of treatment services to men and women (18+) with substance use problems and co-occurring disorders. Clients referred to the program complete between 3-to-12 months of treatment, depending on program placement and clinical progress.
- OPUS uses Living in Balance, an evidence-based cognitive-behavioral curriculum developed by Hazelton.
- Individuals may be referred by Alachua County Treatment Court Programs, the Work Release Program, and the Day Reporting Program. Each referral receives a comprehensive biopsychosocial assessment. Both individual and group counseling sessions are available.
- During January 2021 – September 2021, OPUS received 80 referrals and 54 (68%) were admitted into treatment services.

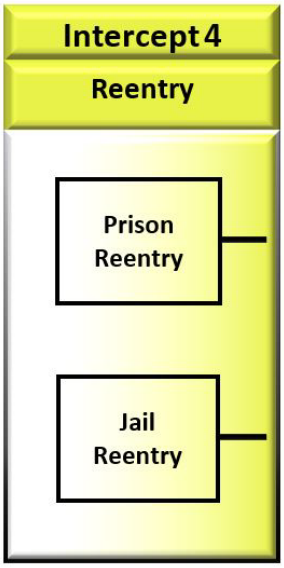
Strengths

- It is evident that ACSO and Wellpath hope to move from a focus on medication management to more robust mental health treatment in jail.
- Medication-Assisted Treatment (MAT) services are not offered in the Alachua County Jail. However at the time of the mapping, Wellpath and Meridian had preliminary discussions regarding MAT services in jail and continued access to MAT in the community with Meridian partnership.

Opportunities for Improvement

- There is an opportunity to promote the use of a co-occurring capable jail mental healthcare provider.
- Reinvigorate CIT among correctional officers and ensure correctional officers staffed in the Mental Health Pods are CIT-trained.
- There is potential for shift towards standardized screening tools to limit number of assessments administered/saturation of screenings conducted.
- Problem solving courts are volunteer programs. There is potential to enroll/recruit more participants.

Intercept 4—Reentry



Jail Reentry/Discharge Planning

Alachua County Reentry Coordination

- Reentry coordination is provided within the Department of the Jail through the Inmate Support Bureau.
- Approximately 169 individuals received screening and referrals from the jail diversion specialist. Referrals are made to Meridian and other community providers through a court order or follow-up upon release.
    - The jail diversion specialist monitors release dates and prior to release individuals are given contact information for the treatment program.

Table 11.
Summary of Reentry Coordination

	Number of individuals
Individuals with MH/SUD receiving reentry coordination prior to jail release	169
Individuals with MH/SUD receiving benefits coordination prior to jail release	27 (Of 27 individuals in CJMHSAG, there are 16 pending cases, 4 approved, 1 denied, 4 reinstated, 2 dropouts)
Individuals with MH receiving short-term psychotropic med fill or prescription upon jail release	230

Inmate Transition Program

- The Inmate Transition Program is available for individuals who apply and then are screened for the class. If they meet the qualifications, then they are selected to participate based on an agreement to Program expectations and rules. Approximately 60 days prior to release, participants may attend classes and are provided a warm hand-off/assistance for housing, transportation, and other support services. The program does not specifically serve individuals with mental health and substance use disorders.

Strengths

- At the time of the mapping, there were two discharge planning efforts in progress. Wellpath has plans to discuss discharge planning needs at Alachua County Jail.
- The JMHCP is supporting part-time peer specialists to conduct initial contact after screening to make bridge from reentry to treatment.
- There is an agreement between ACSO and the Alachua County JPM. They have periodic conversations to discuss best practices to assist the courts and facilitate coordination among programs.

Opportunities for Improvement

- There is potential to mirror the approach of the Inmate Transition Program and target that class to individuals with MH/SUD and apply that program across the jail vs. requiring self-selection

- There is potential to engage first meeting with community provider prior to release.
- Explore the Assess, Coordinate, Identify, and Plan (APIC) model, a best practice for reentry to formalize and standardize reentry planning. Explore opportunity to pilot reentry program for high-risk/high-need MH/SUD population.
- Jail personnel often do not know when individuals will be released (many are released because the charges are dropped, time served). It may be beneficial to explore communication between court services, the public defender's office, and the mental health providers.

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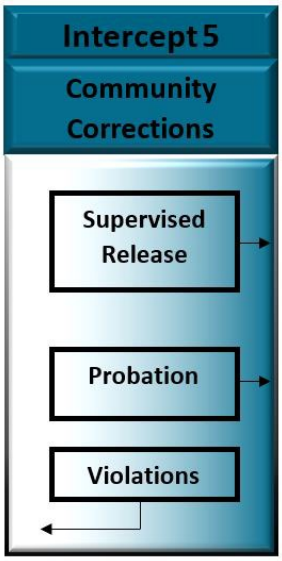
Intercept 5—Community Corrections



Community Supervision

Misdemeanor Probation

- There are specialized caseloads for domestic violence and F.S. 916 clients, but not for individuals with mental health problems and veteran status.
    - Average caseload 1:90-145
- Felony F.S. 916 clients are assigned designated probation officer and placed on a mental health plan until they can graduate the program. Probation reports are maintained until their probation is completed.
- General probation cases utilize the Community Supervision ORAS screening instrument.

Felony Probation

- Of approximately 2,643 Alachua County offenders supervised by FDC, there were approximately 496 (18.77%) released and 219 (or 8.29%) Alachua County revocations.
- FDC probation supports a specialized mental health caseload.
    - Of approximately 36 offenders, there were approximately 10 released (or 27.28%) and two revocations (or 5.56%).
- There is an FDC employment specialist assisting individuals on felony probation to secure employment.

Community Services

Florida Assertive Community Treatment Team (FACT/Alachua & Circuit 8)

- FACT serves adults with severe and persistent MI and those with co-occurring disorders. Mental health services are provided, including:
- Psychiatric care and Medical follow-up; individual supportive therapy; crisis intervention; SUD services; work-related vocational services; support in daily living skills; case management; and assistance with obtaining affordable housing.
- FACT serves a caseload of approximately 100 persons annually.

Peer Services

Gainesville Opportunity Center (GOC) (See Intercept 1 for more information on GOC.)

- The GOC is a clubhouse model, drop-in center that promotes a meaningful workday funded by DCF.
- The GOC provides support for job placement, employment readiness, job coaching and has a collaborative partnership with employers. The GOC assists members in securing transitional employment. Employers allow GOC to fill positions and work with members on the job until they can work independently and connect the member to a more permanent employment position.

The following organizations also support/employ peers: VA, Meridian JMHCP, the MRT, NAMI, and Torchlighters.

Housing

Alachua County made a shift to focus on Permanent Supportive Housing (PSH). Alachua County purchased a hotel to develop into PSH. It is currently undergoing capital improvements. There will be 36-37 units in partnership with Alachua County Housing Authority (ACHA).

Alachua County Community Support Services (CSS)

- CSS worked with the housing authority to secure housing vouchers, valuable for mental health population.

Meridian

- Meridian operates four subsidiary corporations (New Horizons properties) that provide long-term housing for approximately 99 individuals with mental illness. These properties have significant waitlists.

The Lodge operated by Meridian

- The Lodge is a 39-bed (18-19 rooms) motel adjacent to the Meridian campus that provides respite and connections to assistance including securing housing, employment, and Alcoholics Anonymous and Narcotics Anonymous groups. Meridian staffs the Lodge 24 hours-a-day, 7 days-a-week and provides three meals each day.

The Honor Center

- The Honor Center provides transitional housing for veterans, as well as a wide range of supportive services. A total of 45 beds are offered through a specialized Mental Health Residential Rehabilitation Program for veterans who are homeless. In addition, transitional housing support is also offered to veterans with a MH/SU disorder or veterans accepted into permanent housing but not able to immediately enter into it.

The Oxford House

- Several houses are available in Alachua County which offer sober living and provide recovery opportunities from drug and alcohol addiction. One such program is a female transitional house with a total occupancy of 10 women. Similar housing programs are available to men.

Employment

Meridian Forensic Program

- The Meridian Forensic Program assists participants with pursuing employment. The Forensic Program supports coordination with other resources, such as with Vocational Rehabilitation, Santa Fe College, and other entities in the community is accomplished. These efforts encourage and facilitate assistance with development of skills and education to more effectively pursue long-term employment goals.

Partnership for Strong Families and the Library Partnership

- Hosts annual job and resource fair for individuals impacted by the criminal justice system

Strengths

- There is a strong presence of the GOC clubhouse in the community.
- Promote and leverage existing resources through the GOC, NAMI, Meridian, and ACCC to support reentry initiatives.
- There is strong leadership in the community and a vision for housing and Permanent Supportive Housing development.
- GOC hopes to expand to provide/support housing options for the target population of individuals with mental health problems.

Opportunities for Improvement

- Explore formalized employment program in partnership with CareerSource. E.g. Recovery Friendly Workplace models
- There is an opportunity to build on progress toward PSH, there is an inadequate supply of such housing compared to the need.
- Expand existing peer services in Alachua County.
- Determine if there is a need for a specialized mental health and/or veterans caseload.

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Alachua County Action Plan

Based on the Sequential Intercept Mapping (SIM) workshop and the opportunities for improvement discussed at the end of day one, the TAC and SIM participants developed a list of potential priority areas for Alachua County. Participants voted on the goals/priority areas using an anonymous Qualtrics survey to select the top five areas of focus for the action plan development. On day two, the stakeholders were split into Zoom breakout rooms to create tasks/objectives and performance measures/action steps for each goal/priority area identified. Then, each breakout group shared their work on the assigned goal/priority area with the larger group and participated in an open discussion. The following goals/priority areas were ranked based on the Qualtrics survey completed by the participants and the action plan reflects the collaborative effort of the group on day two of the SIM workshop. As a result of day 1 discussions, 9 goals/priorities emerged. Only the top 5 of the 9 goals are addressed in the action plan, as they were voted most important by the group. However, the entire list of the 9 goals/priorities is provided below to guide future planning efforts.

Table 12.
Priority Voting Survey Results

Priority Area/Goal	# Votes
Promote the development of CIT champion programs (among patrol and corrections officers) and staffing of shifts with seasoned CIT officers; develop schedule for CIT refresher courses and target invitations to champions or aspiring CIT leaders.	9
Explore opportunity to use MRT and Co-responder teams to greatest extent; identify goals of each team and ensure that community/stakeholders know when to mobilize one vs. another.	9
Enhance Supported Employment opportunities in Alachua County. Leverage relationship with CareerSource for individuals reentering the community from jail.	8
Explore opportunity to develop MAT services in jail with a transition to community-based MAT programming upon reentry.	6
Explore the use of APIC or other discharge planning tools to formalize and standardize reentry planning. Capitalize on potential to pilot for high-risk/high-need with MH/SUD with new jail healthcare provider.	6
Explore data to determine need to explore population-specific access and referral processes for special populations (e.g. veterans, individuals with developmental disabilities, elderly, dementia, TBI, etc.).	5
Identify opportunities to increase the development of peer recovery support services and peer specialists throughout the continuum (e.g. Recovery Community Organization, peer specialists in-jail, part of reentry planning, etc.).	5
Identify opportunities to utilize problem-solving courts to the greatest extent.	4
Explore opportunities to enhance booking process through use of validated SUD screening tools in addition to existing BJMHS (e.g. DAST, AUDIT). Identify areas where individuals are being screened/assessed and identify opportunities to share information or utilize the same tools to avoid duplication/multiple screens.	4

The stakeholders were enthusiastic and engaged participants throughout the development of a strategic action plan. The plan specifies the individuals responsible for implementation of each task and is presented on the following pages.

Goal 1: Enhance CIT training efforts and increase the number of CIT-trained officers in Alachua County.

	Task	Performance Measure	Lead Person or Organization	Projected Completion Date
Objective 1.1: Promote the development of CIT champion programs and staffing of shifts with seasoned CIT officers.				
1.1a	Enhance CIT program within Alachua County with focus on GPD/ACSO/FDC/ACSO UF/SF law enforcement officers.	• To engage CIT training workgroup to identify achievable goal and encourage training of officers	• LE agencies • Meridian • ACCC	3-6 months
1.1b	Build community awareness and recognition program to promote value of CIT to community.	• To review existing crisis center recognition programs/approaches	• CIT planning group • Business partners • Faith-based organizations • Meridian	Within 1 year
1.1c	Address CIT training needs.	• To identify physical space to hold/conduct classes (potential for Meridian space, SF college training center, Kirkpatrick center, Newberry High)	• ACCC	Within 3 months
1.1d	Increase the number of newly trained CIT-trained law enforcement and corrections officers (approx. 40% of GPD and ACSO trained currently).	• To promote CIT classes • To assess number of correctional officers currently trained/need for training • To invite probation to attend CIT trainings	• LE agencies	Within 1 year
Objective 1.2: Develop schedule for CIT refresher courses and target invitations to champions or aspiring CIT leaders.				
1.2a	Identify CIT Champions within the law enforcement community	• To develop recognition program (e.g. dinner funded by stakeholders) and utilize rotary club of guest speaker to bring awareness to CIT	• CIT planning group • Business partners • Faith-based organizations • Meridian	Within 1 year
1.2b	Gain buy-in from partner agencies and identify training goals.	• To develop strategic communication plan • To invite stakeholders and leadership to CIT graduation ceremonies to promote recognition/impact of CIT program	• LE • ACCC	Within 1 year

Task		Performance Measure	Lead Person or Organization	Projected Completion Date
Objective 1.2: Develop schedule for CIT refresher courses and target invitations to champions or aspiring CIT leaders.				
1.2c	Increase the number of trained CIT-trained law enforcement and corrections officers receiving refresher courses	• To identify potential CIT champions to receive refresher courses	• LE agencies • ACCC	Within 1 year

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Goal 2: Strengthen community and stakeholder understanding of Alachua County's crisis response continuum.

	Task	Performance Measure	Lead Person or Organization	Projected Completion Date
Objective 2.1: Explore opportunities to use MRT and Co-responder teams to their greatest extent.				
2.1a	Develop informational training for community partners, stakeholders, and dispatch.	• To develop and facilitate "CRT/MRT 101 training" • To conduct dispatch training and Q&A session to promote understanding of the CRT and MRT. • To create "MRT/CRT cheat sheet" handout for dispatch	• ACCC/MRT • LE(GPD/ACSO) • Meridian/CRT • CS/JMHCP	3-6 months
2.1b	Explore and emphasize use of MRT/CRT at release from jail and reentry into the community (Intercepts 4/5).	• To bring awareness to the available resource for individuals on probation among both juveniles/adults • To increase utilization among individuals reentering the community	• ACCC/MRT • LE(GPD/ACSO) • Meridian/CRT • CS/JMHCP	3-6 months
Objective 2.2: Delineate the different goals and tasks of MRT and CRT to ensure that community/stakeholders know when to mobilize one vs. another.				
2.2a	Outline differences between MRT and CRT.	• To set up formal meeting between MRT and CRT to distinguish between sim/diff of the two team approaches • To identify clear goals of each team	• ACCC/MRT • LE(GPD/ACSO) • Meridian	3-6 months
2.2b	Gather community feedback regarding MRT/CRT.	• To gather community and consumer opinion on gaps/barriers to services, as well as strengths among teams in the community to promote awareness • To collect MRT/CRT high-utilizer data to develop targeted approaches	• ACCC/MRT • LE (GPD/ACSO) • Meridian/CRT • CS/JMHCP	3-6 months
2.2c	Convene meeting between MRT and CRT to promote integration and collaboration among teams and discuss data collection/tracking.	• To discuss barriers to services, promote information sharing, and address silos • To collect data regarding jail cost savings/ED/CSU days to quantify impact of MRT/CRT and support future enhancement/growth of these resources in the community	• ACCC/MRT • LE (GPD/ACSO) • Meridian/CRT • CS/JMHCP	3-6 months

Goal 3: Enhance Supported Employment opportunities in Alachua County.

Task		Performance Measure	Lead Person or Organization	Projected Completion Date
Objective 3.1: Develop formalized relationships with Alachua County employment providers to serve the reentry population.				
3.1a	Leverage relationship with CareerSource and existing employment providers for individuals reentering the community from jail.	• To determine if there is existing inventory of employers and develop list if there is not • To convene meeting among stakeholders and determine true gap/need in community • To invite/Include Chamber of Commerce in discussions • Conduct outreach to employers who may not already be engaged with • Review Torchlighters list of second change employers for potential employment partners	• Voc. Rehab • Career Source • Chamber of commerce • GOC • Meridian • Karen Black (FDC employment specialist)	Within 6 months
3.1b	Develop/leverage relationship with Goodwill Ticket to Work program	• To engage Ticket to Work Program (job placement coaching) • To conduct jail-in reach and engage case management prior to release	• Goodwill • MBHC/Forensics	Within 6 months
3.1c	Explore available funding to support salaries of individuals through employment programs.	• To explore supported employment models • To pursue grant funding to support Supported Employment program with costs such as salaries and job training	• Voc. Rehab • MBHC/Forensics • GOC	Within 1 year
3.1d	Engage Agency for Persons with Disabilities, Center for Independent Living, Gainesville Opportunity Center, and the Florida Department of Education.	• To engage with these agencies and tap into existing resources provided by each (e.g. bus passes, training/education programs) and determine if there is possibility for jail in-reach	• MBHC/Forensics • GOC	Within 6 months
3.1e	Explore day labor and temporary work opportunities at Grace Market Place.	• To explore funding opportunities to operationalize transportation for day labor • Leverage existing transportation vouchers funded for forensic clients under CJMHSAG	• MBHC/Forensics • Grace Marketplace	Within 1 year

Goal 4: Improve treatment access for individuals with substance use disorders (SUDs).

	Task	Performance Measure	Lead Person or Organization	Projected Completion Date
Objective 4.1: Develop jail-based Medication-assisted Treatment (MAT) program.				
4.1a	Continue discussions between Alachua County Jail, Meridian, and Wellpath.	• To explore all models of jail-based MAT to promote continuity of care	• ACSO • Meridian • Wellpath • Court Services	Within 3 months
4.1b	Review national guidance and toolkits of developing MAT in jails.	• To review SAMHSA best practice guidance on MAT in jails ○ Medication-Assisted Treatment (MAT) for Opioid Use Disorder in Jails and Prisons Toolkit	• ACSO • Meridian • Wellpath • Court Services	Within 3 months
4.1c	Engage Circuit Administration to connect with Florida County Jails to learn about existing MAT programs across the state.	• To conduct outreach to the following county jails: Hillsborough, Nassau, Duval, and Polk Counties	• Court Services	Within 3 months
4.1d	Engage FDC in planning efforts regarding MAT in Alachua County Jail.	• To review Meridian and FDC contract (Meridian provides services upon release), recidivate through DOC and jail ○ It is key for the contract to cover what occurs when an individual receiving MAT services in jail is sentenced to prison. • To leverage existing JMHCP letter of support from FDC	• Meridian • ACSO • Wellpath • Court Services	Within 6 months
Objective 4.2: Develop coordinated reentry process for individuals on MAT.				
4.2a	Discuss possibility of dedicated full-time position/ FTE at classification to promote coordination of care (conduct reentry planning, connection to community resources/MAT clinics, communicate with probation court services and FDC).	• To develop staffing needs required to assist with transition to community-based MAT programming upon reentry. • To promote coordination of care across providers while individual is still in jail • To address psychosocial factors that might act as barriers to MAT follow-up	• ACSO • Wellpath • Court Services	Within 6 months

Goal 5: Enhance reentry process for individuals with MH/SUD.

	Task	Performance Measure	Lead Person or Organization	Projected Completion Date
Objective 5.1: Explore the use of APIC or other discharge planning tools to formalize and standardize reentry planning.				
5.1a	Prioritize development of relationships among discharge planner and community stakeholders.	• To utilize existing committees, platforms, relationships as an entry point to develop familiarity/ contacts	• WellPath discharge planner • CJMHSAG • JMHCP	July 1st, 2022 Ongoing
5.1b	Identify discharge planning tool (e.g. APIC).	• To meet with Wellpath to determine the discharge planning tool in use if any • To create a workgroup to explore tools to bring back recommendations to group/Wellpath • Create a workgroup to explore pilot reentry program for individuals with MH/SUD	• Discharge planner • Contract monitor • Court Services • Meridian • CST Team	August 1st, 2022 Ongoing
5.1c	Recruit Public Defender's Office to inform discharge planning for potential release options.	• To meet with PD to discuss case information needs to better inform discharge plan • Raise discussion at joint meeting to solicit info and ideas (e.g. CJMHSAG, JMHCP) • To emphasize individualized discharge plan	• PDO • Discharge planner • Classification DOJ • Jail Pop. Manager • CST Team	October 1st, 2022 Ongoing
5.1d	Develop staffings to address identified high risk/high need individuals to ascertain reentry needs and resources.	• To engage qualified behavioral health clinician by referral to staffing to identify individualized reentry needs • To identify community stakeholders/ providers and contact to begin warm handoffs	• Qualified BH clinician • Diversion specialist • Discharge planner • Peer • CST Team • Others as needed	June 1st, 2022 Ongoing

	Task	Performance Measure	Lead Person or Organization	Projected Completion Date
Objective 5.2: Capitalize on potential to pilot for high risk/high-need individuals with MH/SUD with new jail healthcare provider.				
5.2a	Create a workgroup to explore pilot reentry program for individuals with MH/SUD.	• To identify stakeholders for workgroup and/or build on existing JMHCP planning • Convene workgroup to discuss goals of pilot program among MH/SUD population	• Discharge planner • Contract monitor • Court Services • Meridian • CST Team	July 1st, 2022 Ongoing

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Quick Fixes / Low-Hanging Fruit

While most priorities identified during a SIM mapping workshop require significant planning and resources to implement, quick fixes are changes that can be implemented with only minimal investment of time and little, if any, financial investment. At the same time, quick fixes can have a significant impact on the trajectories of youth with mental and substance disorders in the justice system. The bulleted items below are activities identified by the TAC that appear to be a "quick fix" that may be explored in addition to implementation of the action plan.

- Coordination of crisis hotlines in conjunction with implementation of 988 efforts.
- Convene a data subcommittee to identify shared goals, review regular outcome data and recommend data-informed program decisions.

Parking Lot

Some gaps identified during the Sequential Intercept Mapping are too large or in-depth to address during the workshop. These items are identified throughout the mapping process and placed in the "parking lot". Items in this section are flagged as important to consider and discuss further, either through targeted training, further mapping efforts, or future investments. Items identified in Alachua County for further discussion include:

- Inappropriate Baker Acts: elderly population with dementia and/or intellectual and developmental disabilities (IDD)

Recommendations

The Sequential Intercept Mapping was an excellent example of community collaboration and a focused approach to addressing the needs of this target population. To that end, as discussed and observed during the SIM, the USF CJMHSA TAC presents the following recommendations:

1. Establishment of a central receiving system was designed as a priority area in the Alachua County Action Plan during the 2016 Alachua County Sequential Intercept Mapping. Continue to pursue efforts towards establishment of a central receiving facility. Since 2016, significant progress has been made including allocation of funding as well as community and stakeholder commitments to establishment of a brick-and-mortar central receiving facility.
2. Consider reviewing existing subcommittees and community/systemwide strategic plans to identify opportunities for alignment and shared visions. This may help to streamline meetings and also ensure that organizations are working towards shared system-wide outcomes.
3. Expand existing data-related meetings to develop a data subcommittee that regularly reviews available county-level data, determines trends and issues for further exploration, and makes recommendations to planning council on measures to be addressed.
4. Review opportunities to develop universal, shared screening tools and results across Intercepts 1-3 to avoid participant screen fatigue and duplication of screening/assessment efforts.
5. Examine employment models that engage non-traditional business partners as employers of individuals with behavioral health and criminal justice histories. Review the Recovery Friendly Workplace Initiative as a potential model.
6. Leverage the strength of the County's crisis support systems (Intercepts 0-1) to address reentry-related issues. This may help intervene with issues early enough to prevent recidivism.
7. A shift in jail healthcare providers presents a timely opportunity for jail leadership and community partners to review polices, services, and processes for the target population of individuals with mental health and substance use disorders in jail (e.g. establishment of MAT services, review of medication formularies, reentry planning and benefits coordination for a greater number of individuals). Explore opportunities to update these processes.
8. Explore the use of peers across the continuum and leverage federal and state resources available for development of recovery community organizations as a potential resource for community supports in Intercept 0, 4, and 5.

For information or clarification regarding this SIM, action plan, and report, contact:

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Please visit the USF CJMHSA Technical Assistance website at www.floridatac.org

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Sequential Intercept Map: Alachua County, Florida

Intercept 0 — Community / Crisis Services

Crisis Hotlines

211 operated by United Way of North Central Florida
- Serves Alachua, Bradford, Dixie, Gilchrist, Levy, and Union Counties
- Callers connected to ACCC

Alachua County Crisis Center
- Provides 24-hr crisis and suicide intervention phone counseling to AC residents
- Crisis line: 352-264-6789
- Receives approximately 45,000 crisis calls yearly

UF Counseling & Wellness Center
- BJA PMHC learning site
- Services students in crisis through BHC Team

VA Veterans Crisis Line

Prevention Efforts

Co-Responder Teams (ACSO, GPD & Meridian)
- 7 teams

MRTs operated by ACCC
- 2 teams

Alachua County Access Center operated by Meridian
- Operates 7:30-6, M-F; calls transferred to emergency screening/support for 24/7 access
- 6,500 – 7,000 walk-ins a year, on average

Community Supports

NAMI

Gainesville Opportunity Center

Intercept 1 — Law Enforcement / Emergency Services

911 / Alachua County Combined Operations Center
- Smart 911 call system is the first point of contact.
- 4/1/2021-9/30/2021, a total of 642 mental health crisis calls and 505 incidents

Law Enforcement / CRT

911 and ACCC refer to CRTs when appropriate. CRTs pair LE and MH clinicians to respond to MH calls (1 CRT funded by JMHCP)

ACSO: 44% CIT-trained; 2 CRTs

GPD: 42% CIT-trained; 4 CRTs

UFPD: Establishing 1 CRT; BH Unit

Baker Act

2,221 involuntary examinations (535 exams for children) for Alachua County residents in FY18-19

CSUs: Meridian, VA, UF Health, NFRMC

*avg wait time, capacity, and admission data provided in report

Marchman Act

ARF/detox services provided at: UF Health Psychiatric Hospital, Meridian

Intercept 2 — Initial Detention / First Appearance

Arrest

Jail Booking
- Screening by LPN/RN within 4 hrs; Brief Jail MH Screen
- 2,766 jail bookings; 937 screened pos for MH; 955 for SUD (4/1/2021-9/30/2021)
- HC provider conducts follow-up if self-reported MH/SUD
- Transition to Wellpath as HC provider in Feb. 2022

Pretrial Release
- PTR staff conducts interview eligibility to MH program using RIA
- PTR rate all arrestees: 60%
- PTR rate arrestees with MH: 43%

First Appearance
- Occurs within 24 hours of arrest
- PTR data shared

Centralized Screening Team
- Ct. Svcs screens within 96 hrs to determine eligibility for programs/ problem-solving courts

Intercept 3 — Courts / Jails

Alachua County Jail
- Population of 843 inmates in Jan. 2022; capacity for 1148; ALS for sentenced: 125 days
- MH ALS: 149 days

Jail Population Management
- Ct. Svcs evaluates for alternative placement

In-Jail Medical Services
- Transition to Wellpath in Feb. 2022 for primary and MH

MH Pod / MH Step-down Pod
- Dedicated staff and caseworker

In-Jail Services/Programs
- Meridian MH/SU Program, VA Orientation Group, MH Classes, AA, NA, Work Release

Problem-solving Courts

Mental Health Court
- Serving 26, capacity for 60

Adult Drug Court
- Serving 30, capacity for 75

Veteran's Treatment Court
- Serving 13, capacity for 60

Felony Forensic Court (F.S. 916)
- 195 total F.S. 916 clients; 91 AC residents (47%)

Additional Programs

Meridian Forensic Program (CJMHSAG)
- Provides MH/SUD/COD tx services
- Goal is to serve 990 over 3 yrs
- Current caseload is 155 clients

OPUS Outpatient Tx Program
- 80 referrals; 54 (68%) admitted

Intercept 4 — Reentry / Transition

Jail Reentry/Discharge Planning

Alachua County Reentry Coordination
- 169 individuals with MH/SUD receiving reentry coordination prior to jail release
- 27 individuals with MH/SUD receiving benefits coordination prior to jail release
- 230 individuals with MH receiving short-term psychotropic med fill/ prescription upon jail release

Inmate Transition Program
- Eligibility is determined by individuals who apply/are screened
- Approx.60 days prior to release participants attend classes and warm hand-off/assistance for housing, transportation, and other services.

Intercept 4 Strengths

Two discharge planning efforts in progress:
- Wellpath has plans to discuss discharge planning needs at Alachua County Jail.
- The JMHCP is supporting part-time peer specialists to conduct initial contact after screening to make bridge from reentry to treatment.

Intercept 5 — Community Supervision / Services

Misdemeanor Probation
- Average caseload 1: 90-145

Felony Probation
- Approx. 2643 Alachua County offenders; 18.77% released; 8.29% revocations
- Specialized MH caseload approx. 36 offenders; 27.28% released; 5.56% revocations

Community Services

FACT Team
- Serves approx.100 indivs/yr

Peer Services

Gainesville Opportunity Center
- Certified clubhouse/drop-in ctr

Housing

Alachua County CCS
- Provides housing vouchers

Meridian
- Serves approx. 99 individuals with MH, waitlists
- The Lodge (39-bed motel)

The Honor Center
- Transitional housing for VT, 45 bed capacity

The Oxford House
- Sober living opportunities

Employment

Meridian Forensic Program
- Partnership with Alachua Co., Voc. Rehab, Santa Fe College, and others

Partnership for Strong Families & Library Partnership
- Hosts annual job/resource fair

Community

Community

Appendix A: Participant Lists

Name	Organization	Email
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Appendix B: Resources

Web Resources

Partners

Criminal Justice, Mental Health, and Substance Abuse Technical Assistance Center (CJMHSA TAC)	http://www.floridatac.org/
Louis de la Parte Florida Mental Health Institute- Department of Mental Health Law and Policy (MHLP)	http://www.usf.edu/cbcs/mhlp/
Florida Alcohol and Drug Abuse Association	https://www.fadaa.org/
Florida Department of Children and Families (DCF)- Mental Health and Substance Use	https://www.myflfamilies.com/service-programs/samh/
Policy Research Associates (PRA)	https://www.prainc.com/
SAMHSA's GAINS Center for Behavioral Health and Justice Transformation	https://www.samhsa.gov/gains-center

The Substance Abuse and Mental Health Services Administration (SAMHSA) Web Resources

The Substance Abuse and Mental Health Services Administration (SAMHSA)	https://www.samhsa.gov/
Center for Mental Health Services	https://www.samhsa.gov/about-us/who-we-are/offices-centers/cmhs
Center for Substance Abuse Prevention	https://www.samhsa.gov/about-us/who-we-are/offices-centers/csap
Center for Substance Abuse Treatment	https://www.samhsa.gov/about-us/who-we-are/offices-centers/csat
Homelessness Programs and Resources	https://www.samhsa.gov/homelessness-programs-resources
National Center for Trauma Informed Care (NCTIC)	https://tash.org/nctic/
National Clearinghouse for Alcohol and Drug Information	https://clearinghouse.fmcsa.dot.gov/
SAMHSA Grant Announcements	https://www.samhsa.gov/grants/grant-announcements-2021
Evidence-Based Practices Resource Center SAMHSA'S Knowledge Network	https://www.samhsa.gov/ebp-resource-center

Other Web Resources

Baker Act Reporting Center	http://bakeract.fmhi.usf.edu/
Council of State Governments (CSG)	http://www.csg.org/
CSG Justice Center	https://csgjusticecenter.org/
Grant Opportunities	http://www.grants.gov/
National Alliance for the Mentally Ill (NAMI)	http://www.nami.org/
National Alliance to End Homelessness	https://endhomelessness.org/resource/housing-first/
National Center for Cultural Competence	https://nccc.georgetown.edu/
National Council for Behavioral Health	https://www.thenationalcouncil.org/
National Criminal Justice Reference Service	https://www.ojp.gov/ncjrs/new-ojp-resources
National Institute of Corrections	http://nicic.gov/
National Institute on Drug Abuse	https://www.drugabuse.gov/
Office of Justice Programs	https://ojp.gov/
Office of Juvenile Justice and Delinquency Prevention (OJJDP)	https://www.ojjdp.gov/mpg
U.S. Department of Health and Human Services - Mental Health	https://www.mentalhealth.gov/
U.S. Department of Veterans Affairs - Mental Health	http://www.mentalhealth.va.gov/
United State Interagency Council on Homelessness	https://www.usich.gov/