



Sequential Intercept Mapping Martin County, Florida

January 15-16, 2020

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Martin County Sequential Intercept Mapping Report Abbreviations

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

General List of Abbreviations

ALF	Assisted Living Facility
ARF	Addictions Receiving Facility
ARNP	Advanced Registered Nurse Practitioner
ADC	Average Daily Census
ADP	Average Daily Population
APIC	Assess, Plan, Identify, Coordinate Model
BA	Baker Act
CIT	Crisis Intervention Team
CJMHPA	Criminal Justice, Mental Health, and Substance Abuse
CJMHPA TAC	Criminal Justice, Mental Health, and Substance Abuse Technical Assistance Center
CoC	Continuum of Care
COD	Co-occurring Disorders (substance use and mental health)
CRS	Central Receiving System
CRF	Central Receiving Facility
CSU	Crisis Stabilization Unit
CTTU	Crisis Triage and Treatment Unit
DCF	Florida Department of Children and Families
EBP	Evidence-Based Practice
EMS	Emergency Medical Services
ER	Emergency Room
FDLE	Florida Department of Law Enforcement
FDOC	Florida Department of Corrections
FACT	Florida Assertive Community Treatment
FDLE	Florida Department of Law Enforcement
FICM	Forensic Intensive Case Management
HIPAA	Health Insurance Portability and Accountability Act of 1996
HUD	U.S. Department of Housing and Urban Development
HUD-VASH	U.S. Department of Housing and Urban Development- Veterans Affairs Supportive Housing
ICCD	International Center for Clubhouse Development
ITP	Incompetent to Proceed
LE	Law Enforcement

LMHP	Licensed Mental Health Professional
MA	Marchman Act
MD	Medical Doctor
MH	Mental Health
MHFA	Mental Health First Aid
MOU	Memorandum of Understanding
NAMI	National Alliance on Mental Illness
NCIS	National Crime Information Systems
NGRI	Not Guilty by Reason of Insanity
PATH	Projects for Assistance in Transition from Homelessness Program
PIT	Point In Time
PTI	Pretrial Intervention
RNP	Registered Nurse Practitioner
RNR	Risk-Needs-Responsivity Model
SA	Substance Abuse
SAMH	Substance Abuse and Mental Health
SIM	Sequential Intercept Mapping
SMI	Serious Mental Illness
SOAR	SSI/SSDI Outreach, Access, and Recovery
SPDAT	Service Prioritization Decision Assistance Tool
USF	University of South Florida
VA	U.S. Department of Veterans Affairs
VOP	Violation of Probation

Martin County Abbreviations

MCSO	Martin County Sheriff's Office
New Horizons	New Horizons of the Treasure Coast
SEFBHN	Southeast Florida Behavioral Health Network
SPD	Stuart Police Department

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Martin 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) held in Martin County, Florida on January 15-16, 2020. 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 Martin 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. Martin County (grantee) hosted the SIM at Palm City Community Center (2701 SW Cornell Ave, Palm City, FL, 34990).

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 Martin County in achieving their goals

Background

Martin County, Criminal Justice, Mental Health, and Substance Abuse (CJMHS) Reinvestment grantee, requested the SIM as a top priority of their three-year implementation grant awarded by the Florida Department of Children and Families (DCF) Substance Abuse and Mental Health Program Office. The SIM assisted Martin County with the activities and 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 SIM was comprised of 26 participants representing cross-systems stakeholders including judges, mental health and substance use treatment providers, human services, corrections, advocates, peer specialists, law enforcement, county courts, county commission, and the judiciary. A complete list of participants is available in Appendix A at the end of this report. Abby Shockley, Katelind Halldorsson, and Michele Saunders, from the University of South Florida (USF) Criminal Justice, Mental Health, and Substance Abuse Technical Assistance Center (CJMHS TAC) facilitated the mapping. Michele Miller of Martin County organized the logistics of the mapping.

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 SAMH disorders flow through six distinct intercept points of the Martin 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 Martin County SIM map is located on page 23 of this report.

Keys to Success

Existing Cross-Systems Partnerships

Martin County's history of collaboration between the behavioral healthcare and criminal justice systems is reflected in a number of existing local efforts that were identified prior to and during the SIM. Examples include:

1. Public Safety Coordinating Council
2. Drug and Alcohol Advisory Committee
3. Circuit 19 Baker Act Task Force

Representation from Key Decision Makers

The SIM included broad, cross-systems representation and key decision-makers. Opening remarks set the stage and established a clear message as to the importance of the mapping and the county's commitment to an action plan. Key decision-makers included:

- The Honorable Judge Jennifer Waters, Martin County Judge
- Commissioner Harold Jenkins, District 3, Board of County Commissioners

Commissioner Jenkins representing Martin County Board of County Commissioners and Michelle Miller, Health and Human Services Manager, representing Martin County made opening remarks and welcomed the participants.

Martin County Sequential Intercept Map Narrative

This narrative reflects information gathered during the two-day mapping and often verbatim from the participants or local experts. This narrative is a reference guide to navigate the Martin County SIM map, especially with regard to acronyms used on the map.

Intercept 0—Community Services

Prevention Efforts

211 operated by United Way of Martin County

- Serves Martin, Indian River, Okeechobee, and Palm Beach Counties.
- Available 24-hours-a-day, 365-days-a-year online, by phone, and text.
- 211 is a community help and crisis hotline that provides suicide prevention, crisis intervention, information, assessment, and referral to community services for individuals of all ages.
- When an individual calls 211 for mental health crisis assistance, the call is transferred to New Horizons of the Treasure Coast (New Horizons).
- If there is an immediate threat, 211 will call 911 dispatch.

Crisis Line operated by New Horizons

- The crisis line is accessible 24/7 by way of telephone at (772) 468-3909.
- The crisis line provides a crisis assessment and/or referral to the level of care that will meet the needs of the individual.

Mobile Crisis Team operated by New Horizons

- The Mobile Crisis Team is accessible 24/7 and serves all ages but they are based in Indian River County.
 - The mobile crisis team is comprised of a master's level clinician, licensed counselor, and peer specialist.
- To access the Mobile Crisis team, individuals can call New Horizons main number (727-672-8400) and press 2 or call the mobile crisis team directly at 772-468-3909.
- The team will conduct a telephonic assessment to determine if the crisis team should be dispatched by a licensed clinician to the scene to initiate a Baker Act Order.
 - The Mobile Crisis Team initiates the Baker Act Orders and law enforcement officers provide transportation.
- The goal of the Mobile Crisis Team is to divert individuals from initiation of an involuntary Baker Act Order and involvement with law enforcement. The Mobile Crisis Team will refer the individual to appropriate treatment services. If the individual does not meet the criteria for a Baker Act Order, the Mobile Crisis Team will develop a safety plan as well as inform the family on available treatment services.
- In the following 24-48 hours after the initial call, the Mobile Crisis Team will follow up with the individual.
- New Horizons collects data on the mobile crisis calls for each zip code and the number of calls that result in a Baker Act Order.

NAMI Peer-to-Peer Program

- The NAMI Peer-to-Peer Program is facilitated by certified Peer Specialists.
- Meetings are every Wednesday at St. Mary's Episcopal Church at 6 p.m.
- The group discusses needs and provides support to individuals with mental health problems.
- Family and Friends Support Groups are also provided.

Drop-In Center operated by Mental Health Association of Indian River County

- The Drop-In Center is located at Harbor Network at 618 Central Parkway, Stuart, FL.
- The Drop-In Center is peer-operated and open 365 days-a-year.

Strengths

- The Martin County Sheriff's Office (MCSO) is determining the feasibility of implementing a Mobile Crisis Team that is operated locally in Martin County.
- Currently, the New Horizons Mobile Crisis Team collects data on the type of crisis call and the corresponding zip codes. There is the opportunity to analyze this data and determine where the greatest need is for additional mobile crisis clinicians/services.
- MCSO and New Horizons plan to create a central depository of available services for Martin County residents.
- MCSO and Stuart Police Department (SPD) have a strong relationship with the community.

Opportunities for Improvement

- Currently, the Mobile Crisis Team serves the entire circuit and is not housed locally.
- There is a need to spread awareness about the availability of the Drop-In Center because it is underutilized.
- There is not a centralized hub or location where an individual can go to get a refill on their prescription medications or receive access to crisis services immediately.
- There are multiple crisis hotlines and phone numbers available to the public. An assessment of the types of referrals and access provided by each host agency would be valuable. This will ensure that appropriate referrals or linkages to immediate services are in place across all numbers.

Intercept 1—Law Enforcement & Emergency Services

Emergency Services and 911

911

- If an individual is experiencing an apparent behavioral health crisis, 911 is the first point of emergency contact and system response.
- 911 dispatchers receive mental health training, but they do not determine if calls involve a mental health crisis. This decision is at the discretion of the responding deputies.

Law Enforcement

Sheriff's Office

- Martin County Sheriff's Office (MCSO)
 - MCSO is in the process of obtaining a new data system.

Municipal Law Enforcement

- Stuart Police Department (SPD)
- Sewall's Point Police Department
- Jupiter Police Department

Crisis Intervention Team (CIT) Training

- MCSO has a goal of training all officers in CIT.
- MCSO alternates with St. Lucie Police Department in facilitating 40-hour Memphis Model CIT training.
 - The trainings are open to law enforcement officers in Martin County, St. Lucie County, Okeechobee County, and Indian River County.
 - In addition to the 40-hour Memphis Model training, MCSO has also participated in the Florida Department of Law Enforcement (FDLE) Crisis Intervention Training through the law enforcement training academy.
- Approximately 150 MCSO deputies and corrections officers are CIT-trained.
 - Dispatch is also invited to attend CIT trainings.
 - There are not enough deputies to allow the whole workforce to attend training, while still being fully staffed.
- School resource officers are trained in both CIT and Youth Mental Health First Aid.

Martin County Sheriff's Office Behavioral Unit

- The MCSO Behavioral Unit is still in development. New Horizons has one case manager housed in MCSO and another case manager is in the process of being hired. The MCSO Behavioral Unit is in the process of establishing initiatives to assist with reentry from jail.



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.
 - If an individual meets the criteria for an involuntary Baker Act examination and has *not committed a law violation*, the law enforcement officer will transport the individual to the Martin County Jail vestibule. From the jail, MCSO correctional officers will transport the individual to the Baker Act receiving facility at New Horizons in St. Lucie County. (Martin County is in the process of amending this practice.)
 - 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 Martin County Jail to be booked; or transported to jail vestibule to be transported by a correctional officer to the Baker Act receiving facility at New Horizons in St. Lucie County.
 - If an individual meets the criteria for an involuntary Baker Act examination and has committed a *felony offense*, the individual is transported to the Martin County Jail.
 - If an individual has committed an offense, but does not meet Baker Act criteria, the person is transported to the Martin County Jail.
- Law enforcement provides the majority of Baker Act transports in Martin County.
 - The use of handcuffs for Baker Act transports is up to the discretion of the officer.
- Martin County contracts with Answer to Care, a private transportation service, to provide Baker Act transports between receiving facilities.
- According to the Baker Act Reporting Center at the University of South Florida, in FY2017-18, there were 1,072 involuntary Baker Act examinations of Martin County residents (adults and youth); approximately 855 of those examinations were for adult residents.

Marchman Act

- The Marchman Act is not widely utilized in Martin County.
- Marchman Act Orders in Martin County are typically only initiated by family members and not utilized by law enforcement.
- Officers utilize Narcan for those who may have overdosed on an opiate. If they encounter an individual who has overdosed on any substance, they are transported to the hospital.

Crisis Services

New Horizons of Treasure Coast (public crisis stabilization unit, Baker Act Receiving Facility)

- The New Horizons Crisis Stabilization Unit (CSU) is a 30-bed co-occurring capable unit for adults located in St. Lucie County.
- The average length of stay for individuals is approximately three days.
- The CSU is frequently at capacity and when they reach a census of 33 patients, they transport individuals to other out-of-county hospitals.
 - This becomes a challenge for individuals who do not have insurance.

Coral Shores Behavioral Health (private, for profit Baker Act Receiving Facility)

- Coral Shores has been operational in Martin County since 2017.
- Coral Shores has a 24/7 crisis line operated by clinicians and walk-ins are welcome.
 - The hotline facilitates admissions and provides no-cost intervention/assessment.
 - (772) 403-2273
- The Coral Shores crisis stabilization unit (CSU) is an 80-bed facility. However, they are currently at

- reduced capacity (45 beds) due to low demand and staff ratios.
 - Currently, they are serving 25 clients in the CSU.
 - The average length of stay is seven-days.
- Coral Shores also operates an adolescent unit and a partial hospitalization unit.

Emergency Rooms

- *St Lucie Medical Center*
- *Port St. Lucie Hospital*
- *Longwood Regional Hospital*
- *Cleveland Clinic*

Detoxification Services

Port St. Lucie Hospital

New Horizons (located in St. Lucie County)

Coastal Detox

- Private pay detoxification facility located in Martin County.

Strengths

- There are New Horizons case managers housed within MCSO.
- The Circuit 19 Baker Act Taskforce meets quarterly with representation from local providers and stakeholders.
- MCSO has the capability to code crisis calls and examine data regarding these calls for service.

Opportunities for Improvement

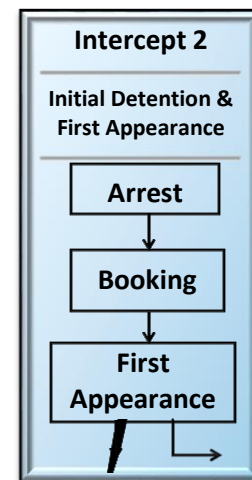
- There is not a publicly-funded crisis stabilization unit located in Martin County.
- Individuals under a Baker Act order are not directly transported to the nearest receiving facility. (After law enforcement initiates a Baker Act order, the responding officer transports individuals to the jail vestibule and correctional officers then provide transport to the receiving facility at New Horizons in St Lucie County.) It is encouraged that this process continues to be addressed and that key stakeholders involved revisit the county's Transportation Plan.
- There is a need for in-county detoxification services.
- Continue to increase the number of officers who are CIT trained and track how often CIT trained officers are diverting people from the criminal justice system.
- There is a need for consistent processes associated with determining eligibility for services at receiving facilities prior to drop-off.
- The Marchman Act is underutilized in Martin County. There is a need to offer training on how to use the Marchman Act in Martin County.

Intercept 2—Initial Detention & First Appearance

Booking

Booking and Intake

- A booking officer completes a brief questionnaire that captures self-harm and basic demographics.
- All individuals meet with a nurse who completes a medical and mental health questionnaire in addition to assessing for suicidal ideations.
- The Martin County Jail data system generates a list for urgent and routine physical and mental health needs based on intake screening done by the RN.
 - Urgent tasks will be seen by Armor personnel (jail healthcare provider) within 24-to-48 hours, suicide risk within 24 hours, and a routine task will be seen within 7 days.



First Appearance

- The first appearance hearing occurs by way of video conference within 24 hours of arrest.
- At first appearance, probable cause is determined and if the individual may bond out (within 48 hours) or remain in jail.
- The Judge and Public Defender's Office do not receive information about mental health status of individual unless it is in the arrest affidavit.

Pretrial Diversion

- Pretrial Diversion serves all eligible individuals, including those who may have mental health problems.
- Pretrial release may be initiated at first appearance or following first appearance.
- Eligibility is based upon type of crime, criminal history, and status of permanent residence.

Strengths

- There is good communication between Armor and the Public Defender's Office when an individual at booking has mental health problems.

Opportunities for Improvement

- There is an opportunity to expand the amount of information an arresting officer provides to the correctional officers at booking.
- An evidence-based screening tool is not utilized at booking.
- There is an opportunity to better utilize pretrial diversion for individuals with mental health problems.
- There is potential in implementing a citation program to divert individuals with substance use and mental health problems from jail.

Intercept 3—Jails & Courts

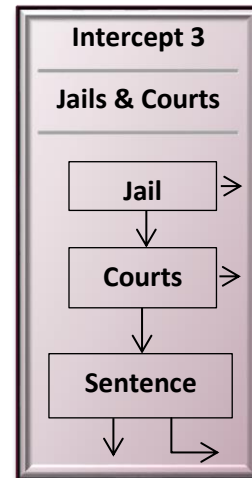
Martin County Jail

(Intercept 2 presents the jail booking and intake information)

- The average daily population at the time of the mapping was 450 inmates.
 - The Martin County Jail has a capacity to house 800 inmates.
- At the time of the mapping, an estimated 16 percent of inmates were on psychotropic medications.
- The Mental Health Observation Unit in the jail is for those with mental health problems, who may not be appropriate to house with general population.

In-Jail Medical Services provided by Armor Correctional Healthcare

- Martin County Sheriff's Office contracts with Armor Correctional Healthcare to provide jail medical services.
- The Armor personnel include one full-time licensed mental health clinician, three nurses during the day, two nurses at night, and a prescriber.
 - The psychiatrist is present at the jail 8-to- 10 hours a week.
 - The nurse practitioner is present at the jail 40 hours a week.
 - A licensed mental health clinician is available 40 hours a week.
 - Nursing is provided 24/7.



Dunklin Substance Use Program

- The Dunklin Program is a 6-month, faith-based substance use program for males.
- The program is voluntary and anyone can participate through an application and review process.
- It is a 12-step program that utilizes peers.
- The program can serve 40-50 participants at a time.
- Some participants utilize community-based services available through Dunklin upon release.

Additional In-Jail Services

- GED Program
- Love Unveiled
 - Trauma-focused women's group
- Medication-Assisted Treatment (MAT)
 - For pregnant females only

Problem-solving Courts

Mental Health Court (MHC)

- Individuals can be referred by jail, case managers, family members, community providers.
- The MHC is generally voluntary and accepts individuals who have committed misdemeanor and felony offenses. All clients are regularly drug tested.
 - There are some clients for which MHC participation is not voluntary: conditional release or requirement of probation.
- In January 2020, the MHC was serving 70 clients.
- The average length of the MHC is 12-24 months.

- A minimum 6 months for misdemeanor offenses
 - A minimum of 12 months for felony offenses
- Once admitted to the program, participants are assessed using the Ohio Risk Assessment Screening (ORAS), biopsychosocial assessment, psychiatric assessment, and a needs assessment to determine their treatment needs.
- New Horizons is the primary provider for MHC.
- Additional providers include Coral Shores, Port St. Lucie Hospital, St. Lucie Medical Center and Lawnwood Pavilion.
- Services include inpatient and outpatient mental health services as well as SOAR benefits assistance.
- Sanctions for the MHC treatment program may include community service, essays and jail.
- Upon graduation, for diversion cases, all charges will be dropped.

Adult Drug Court

- Individuals can be referred to the Drug Court through referral by the Judge, Public Defender's Office, State Attorney's Officer, case management, or private defense attorney.
 - If individuals have a co-occurring disorder, they may be transferred to the Mental Health Court.
- In January 2020, the Adult Drug Court was serving 45 clients.
- The average length of the Drug Court program is approximately one year.
- The ASAM Criteria is utilized to determine program participant placement.
- Providers for the Drug Court include:
 - New Horizons
 - Substance use counseling, inpatient and outpatient substance use treatment
 - ADAP Counseling Services
 - Treasure Coast Recovery Center
 - Project Lift
 - Serenity Counseling

Strengths

- There are strong relationships between MHC staff and community providers, enabling streamlined access to services for MHC clients.
- Martin County is considering implementation of a Veterans Treatment Court.

Opportunities for Improvement

- There are two case managers for Mental Health Court clients. One is housed at Martin County Health and Human Services and another is at New Horizons.
- The jail and community providers have different medication formularies.
- There is an opportunity to formalize strong relationships and processes that assist with access to services for all individuals with MH/SUD in the jail rather than only those involved with MHC.

Intercept 4—Reentry

Jail Reentry/Discharge Planning

Martin County Jail Discharge

- The Martin County Jail does not have a formal discharge planning process, yet they assist individuals with mental health needs who are exiting the jail with items such as food, transportation, bikes, and clothing.
 - At the time of the mapping, MCSO was assisting 30 inmates with discharge planning, who have mental health problems.
- All individuals are released from jail at 5 a.m. unless otherwise specified by the Court.
- Individuals with mental health problems are released with a three-to-seven-day paper prescription at discharge.
- For individuals with more serious mental health needs, Armor will try to discharge them with up to 30 days of medication, rather than a prescription.
- The Public Defender's Office also funds a reentry case manager to assist individuals (both with and without MH/SUD) exiting the jail. The reentry case manager may refer them to services or assist them in scheduling appointments prior to their release.



Lifebuilders of the Treasure Coast

- Lifebuilders provides financial assistance to any individual that has been touched by the criminal justice system.
- They have an established referral process and committee to assist individuals in need.

Strengths

- The Public Defender's Office funds a reentry case manager to assist individuals exiting the jail. The reentry case manager may refer them to services or assist them in scheduling appointments prior to their release.

Opportunities for Improvement

- There is not a formal discharge planning process, but MCSO is in the process of establishing discharge planning through the MCSO Behavioral Health Unit.
- It is difficult to get individuals into both civic and forensic state hospitals and there is no place for them to go while they are waiting for state hospital placement, except jail. There is a need for a short-term residential treatment facility.
- There is a need for a program for F.S. 916 clients who may be able to receive restoration services in the community, in order to divert from jail.

Intercept 5—Community Corrections

Probation

County Probation operated by C.O.R.E.

- The average caseload for a probation officer is 1:175-200, with a full-time assistant.
- When applicable, probation attends mental health court meetings to stay informed on their clients.

State Probation

- The average caseload is 1:20-30.

Housing

- There are not many housing options for the target population in Martin County.
- Martin County Health and Human Services recently applied for funding for individuals leaving the jail who are homeless.

Employment

CareerSource

Florida Division of Vocational Rehabilitation

Additional Resources

Dunklin Substance Abuse Program

- Dunklin is a faith-based substance use program
- They do not accept individuals on psychotropic medications.

Community Health Services

- Federally Qualified Health Center (FQHC) located in Martin County that provides physical and mental healthcare and dental health services on a sliding scale.

Lifebuilders of the Treasure Coast

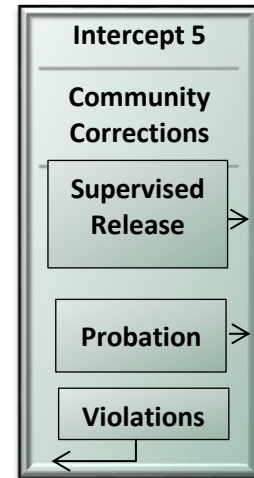
- Lifebuilders provides financial assistance to any individual that has been touched by the criminal justice system.
- They have an established referral process and committee to assist individuals in need.

NAMI Peer-to-Peer

- The NAMI Peer-to-Peer program is facilitated by certified Peer Specialists.
- Meetings are every Wednesday at St. Mary's Episcopal Church at 6 p.m.
- The group discusses needs and provides support to individuals with mental health problems.
- Family and Friends Support Groups are also offered

Drop-In Center operated by Mental Health Association of Indian River County

- The Drop-In Center is located at Harbor Network at 618 Central Parkway, Stuart, FL.
- The Drop-In Center is peer-operated and open 365 days-a-year.



Strengths

- The Marty Bus System will provide free transportation to the Palm Beach VA for Martin County veterans.

Opportunities for Improvement

- New Horizons employs two case managers in Martin County.
 - One case manager for Mental Health Court (MHC)
 - One case manager who is housed in MCSO.
- There is a waitlist for New Horizons mental health services.
- There is only one substance use disorder clinician for New Horizons.
- There is a very limited supply of affordable housing options for this target population.
- There is a need for public outpatient mental health and substance use treatment services in Martin County.
- In addition to job training and vocational programs for the MH/SUD target population, there is a need to enhance coordination of wraparound supports that address social determinants of health.
- There is a need to explore the use of a specialized probation caseload for individuals with mental health, substance use, and/or co-occurring disorders.
- There is a need to increase the number of applications for those eligible for SSI/SSDI and Medicaid.

Martin County Priority Areas

SIM participants are asked to identify a set of priorities and these priorities are ranked through a voting process where each participant has three votes. The voting took place on January 16, 2020. The participants voted on a list of 14 priorities and the top five priorities are reflected in the Martin County Action Plan.

Rank	Priority	Votes
1	Lack of local mobile crisis services	12
1a	Increase affordable and specialty housing for the target population	12
2	Lack of outpatient services and provider capacity (in and out of jail)	9
2a	Need for more case management	9
3	Central hub/rapid access center	6
4	Use of citations for diversion	5
5	Expand Medication Assisted Treatment in jail	4
6	Formalize discharge/transition planning	2
7	Underutilization of Peer Specialists	1
7a	Specialized probation caseloads	1
7b	Expand use of benefits assistance (SOAR, SSI/SSDI)	1
8	Expand utilization of Pretrial Diversion	0
8a	Develop program for Not Guilty by Reason of Insanity (NGRI)	0
8b	Use of consistent medication formularies by jail and community providers	0

Top Martin County Priorities

1. Establish a Mobile Crisis Team in Martin County
2. Increase Case Management
3. Increase Service and Provider Capacity (in and out of jail)
4. Specialty Housing for the MH/SUD Target Population Reentering the Community
5. Create a Central Hub/Rapid Access Center

Parking Lot:

The Action Plan on page 16 reflects Martin County's top five priorities areas. However, participants identified several issues throughout the day that had impact or reach beyond the scope of the mapping. These issues were captured in a "Parking Lot" designated for issues that legitimately impact service delivery and warrant further discussion among partners at a later date. Parking Lot issues identified include the below:

- It is difficult for individuals to gain admission to the state hospital system unless they commit a felony offense. Additionally, the admission processes for both the civil and forensic state hospital is extensive, resulting in longer waiting periods.
- Collaboration between Martin County and SEFBHN could be strengthened to ensure that financial barriers to clients' access to care are addressed.

Martin County Action Plan

Action Planning Process

Following the identification of the top five priorities, participants broke out into groups and began identifying objectives and activities for each. This process encouraged participants to set realistic timelines and expectations for each objective, as well as established ownership of the Action Plan. The group then came together to review and find consensus for each priority area. Thoughtful observations and feedback were given by the group and the action plan was finalized.

The stakeholders were enthusiastic participants throughout the development of a strategic action plan. The plan specifies the individuals responsible for implementation of each action step and is presented on the following pages (one priority described on each page).

Priority Area 1: Establish a Mobile Crisis Team (MCT) in Martin County

Objective		Action Step	Who	When
1.1	Analyze data to establish staffing and funding need	<ul style="list-style-type: none"> To gather utilization data of Martin County residents from current New Horizons MCT (that serves Circuit 19) To gather utilization data crisis services from Coral Shores, Schools, MCSO, and other law enforcement agencies To determine what resources are already available and demand for Martin County team 	<ul style="list-style-type: none"> New Horizons Martin County Schools Coral Shores SEFBHN MCSO Joan Baldwin Hoffpauir (MCSO) 	Within 30 days-February 2020
1.2	Establish a focus group with key stakeholders	<ul style="list-style-type: none"> To explore the feasibility of establishing a Baker Act Taskforce for Martin County or increasing Martin County participation in the Treasure Coast Baker Act Taskforce To volunteer to host a future meeting in Martin County to increase attendance by Martin County stakeholders 	<ul style="list-style-type: none"> New Horizons Martin County Schools Coral Shores SEFBHN MCSO Joan Baldwin Hoffpauir (MCSO) 	March 2020
1.3	Collaborate with New Horizons Mobile Crisis Team to partner on the development of local MCT services	<ul style="list-style-type: none"> To identify host agency for MCT To identify funding need to support local team To explore funding opportunities for pilot of local MCT services 	<ul style="list-style-type: none"> New Horizons MCSO SEFBHN 	Six months-one year

Priority Area 2: Increase Case Management

Objective		Action Step	Who	When
2.1	Explore feasibility of utilizing MCSO EZRI software to allow all agencies to utilize one common database	<ul style="list-style-type: none"> To identify who can have access to the data sharing system To develop MOUs to grant access To determine different access levels and assure HIPAA information is protected 	<ul style="list-style-type: none"> MCSO Martin County Michelle Miller (Martin County) 	Jan 2020
2.2	Use data to assess need for case management staffing volume through MCSO	<ul style="list-style-type: none"> To explore best practices associated with reentry planning (e.g. Assess, Plan, Identify, Coordinate Model) 	<ul style="list-style-type: none"> MCSO Martin County Desiree Frank (MCSO) Captain Perez (MCSO) Joan Baldwin Hoffpauir (MCSO) 	July 2020
2.3	Identify high risk individuals reentering the community to target continued case management at specific intervals (e.g. 3 months, 6 months)	<ul style="list-style-type: none"> To develop matrix of risk factors or utilize evidence-based risk assessment model (e.g. Risk-Need-Responsivity model) To determine the case management needs and determine the funding streams To explore feasibility of development of a Florida Assertive Community Treatment Team or Intensive Case Management Team 	<ul style="list-style-type: none"> MHC Team Michelle Miller (Martin County) MCSO 	March 2020
2.4	Explore opportunities for coordination of care management among all case managers in Martin County	<ul style="list-style-type: none"> To facilitate bi-monthly meeting of all case managers across providers To discuss the waiting list for case management services 	<ul style="list-style-type: none"> MCSO New Horizons Health and Human Services FACT 	March 2020

Priority Area 3: Increase Service and Provider Capacity (in and outside of jail)

Objective		Action Step	Who	When
3.1	Establish individual and group treatment services at the jail	<ul style="list-style-type: none"> To explore collaborative federal grant opportunities with MCSO and community providers To contact SEFBHN to determine available funding streams To review opportunities to coordinate additional services with Armor To identify opportunities to utilize peer specialists 	<ul style="list-style-type: none"> Sharyn Krim (Martin County) 	90 days
3.2	Assess the need for long term civil stabilization beds	<ul style="list-style-type: none"> To meet with SEFBHN, New Horizons and DCF to raise issues related to service gap To explore opportunities and financial requirements associated with re-opening the SRT 	<ul style="list-style-type: none"> MCSO SEFBHN New Horizons DCF 	90 days
3.3	Add a SOAR-trained individual at the jail	<ul style="list-style-type: none"> To schedule a meeting any providers interested in contracting or working with the county to establish position or contract with existing SOAR trained individual to work with individuals in jail 	<ul style="list-style-type: none"> MCSO Behavioral Unit 	90 days
3.4	Develop a subcommittee to oversee service expansion and assess ongoing gaps	<ul style="list-style-type: none"> To identify subcommittee members To create identify resources and assess needs using SIM Report To explore opportunities to enhance existing resources and/or build new partnerships 	<ul style="list-style-type: none"> New Horizons MCSO Coral Shores State Hospital representative Indiantown Center FQHC SEFBHN 	90 days

Priority Area 4: Specialty Housing for MH/SUD Target Population Reentering the Community

Objective		Action Step	Who	When
4.1	Establish an advocacy team comprised of County Commissioners, pastors, courts, Sheriff's office, and service providers	<ul style="list-style-type: none"> To educate community on issues related to the impact of homelessness and build awareness around homelessness and mental health To utilize data from the Point in Time (PIT) count and other sources to understand the scope of the housing needs for this CJMHSA target population in Martin County (data point to consider) 	<ul style="list-style-type: none"> Phillip Rachford (Martin County) NAMI Martin County 	Three to six months
4.2	Develop an inventory of current housing options such as halfway/transitional housing, veterans housing	<ul style="list-style-type: none"> To collect information on target population and eligibility limits of each resource To identify where gaps exist comparing PIT count to bed capacity and specialty needs associated with target population 	<ul style="list-style-type: none"> Yuri Parrage 	Three to six months
4.3	Determine potential future housing options	<ul style="list-style-type: none"> To examine best practice models associated with target population (e.g. SAMHSA Permanent Supportive Housing Toolkit) To explore opportunities to utilize developer incentives To assess specialty program needs for housing for males and females 	<ul style="list-style-type: none"> Treasure Coast Homeless Servicing Council Martin County HHS 	Three to six months
4.4	Identify funding opportunities for housing expansion	<ul style="list-style-type: none"> To explore use of Shelter Plus Care To research housing models and financial resources associated with each model 	<ul style="list-style-type: none"> Treasure Coast Homeless Servicing Council Martin County HHS 	Three to six months

Priority Area 5: Create a Central Hub/Rapid Access Center

Objective		Action Step	Who	When
5.1	Explore feasibility of and functions for the hub	<ul style="list-style-type: none"> To research similar models (e.g. BayCare Behavioral Health Urgent Care Model West Central Florida Mental Wellness Coalition Inc.) To develop an inventory of desired services for the Hub To identify target population 	<ul style="list-style-type: none"> New Horizons Martin County HHS MCSO 	Six months
5.2	Assess opportunity for use of shared staffing models with existing partners	<ul style="list-style-type: none"> To establish staffing pattern and FTE requirements (Peers, LMHC, MD) To reach out to BayCare to explore Urgent Care Model To determine target population 	<ul style="list-style-type: none"> New Horizons Martin County HHS MCSO 	Six months
5.3	Explore funding opportunities	<ul style="list-style-type: none"> To discuss collaborations with FQHCs (Indiantown Center), National Council (Certified Community Behavioral Health Clinics https://www.thenationalcouncil.org/topics/certified-community-behavioral-health-clinics/), treatment providers, and hospitals 	<ul style="list-style-type: none"> New Horizons Martin County HHS MCSO SEFBHN 	Six months

Recommendations

The two-day 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 recommend the following actions:

1. A formal process should be developed to facilitate data sharing across multiple partners, whereby a list of individuals booked into the jail is shared on a daily basis to community providers. This can assist with the development of an in-reach process for case managers to contact the jail and begin working with the client prior to their release. This would also have the benefit of reducing wait-times for appointments and ensuring appropriate access to wraparound services.
2. Martin County should conduct an analysis of individuals who are involved in multiple criminal justice and behavioral health systems. Data to be reviewed should include CIT, Crisis Unit, Hospital, Jail and Mental Health Court data. This may help to identify a subset of the grant population where enhanced services and outreach can be targeted. Additionally, data should assess how many individuals are without benefits (Medicaid and SSI/SSDI). Utilization of the existing SOAR and Social Security expertise in the county would ensure access to financial resources for services.
3. Martin County provided several examples of informal relationships and referral agreements that existed. Those processes and relationships should be formalized through MOUs or policies to ensure that the enhanced access or streamlined processes are not lost if any individual were to change roles/positions (e.g. communication between Armor and community providers regarding quantities of medication provided upon release from jail).
4. Martin County should explore the expanded use of peers in the front end and back end (Intercepts 0 and 5) of their systems. Peers could assist with building healthy networks for clients transitioning out of the criminal justice system and can also serve as linkages to other peer support services that can be accessed in the community. Peers are also beneficial for use in problem-solving courts, and jail in-reach programs. The expansion of drop-in centers and development of recovery community organizations for those with co-occurring substance use disorder would be beneficial. These programs would be ideal locations for development of Supported Employment programs and other wraparound support services for the target population.
5. It would be beneficial to consider having case managers meet with some regularity to coordinate and collaborate on their work to maximize coverage and fully understand who is providing case management and for what population. This would enable the county to determine where gaps in case management exist and/or if duplication is occurring across agencies. This is especially critical given the new case management position being established by MCSO.
6. It would be beneficial to explore training opportunities for Judges, State Attorneys and law enforcement officers on behaviors and/or symptoms that should trigger an immediate MHC referral. Additional training topics could include recognizing signs and symptoms of mental illness and benefits associated with the use of pretrial diversion for the target population.

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

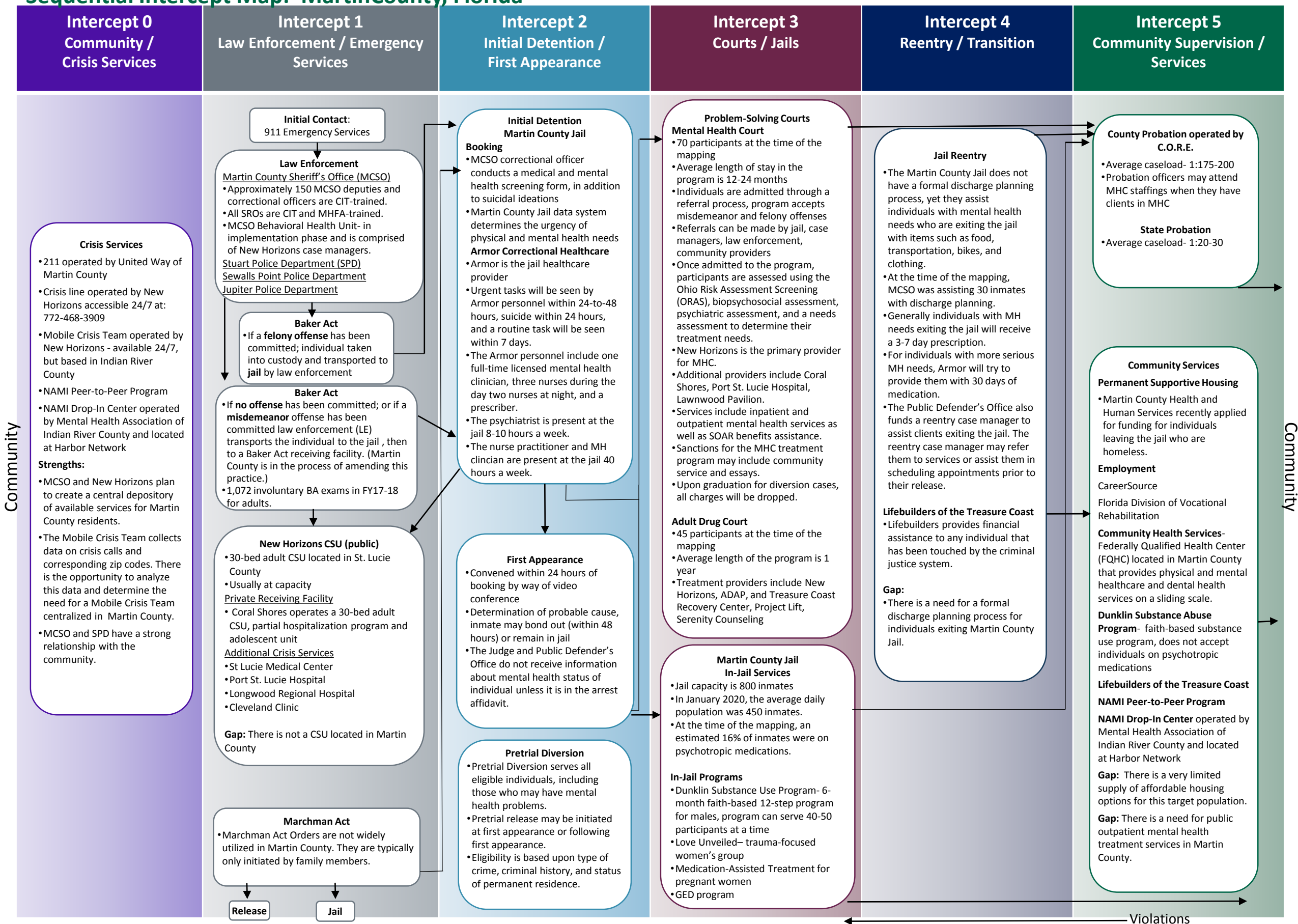
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Please visit the USF CJMHSA Technical Assistance website at www.floridatac.org

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Sequential Intercept Map: MartinCounty, Florida



Appendix A: Participant List

Participant Name	Organization
Andrea Briner	Andis Integrated Health Care
Angel Piper	Coral Shores Behavioral Health, CEO
Arlin Villari	Mental Health Court Program Manager
Desiree Frank	Martin County Sheriff's Office
Eric Garza	Tykes & Teens, COO
Grace Irving	Coral Shores Behavioral Health
Ivana Ayala-Esslinger	Martin County School District
Janice Greller	NAMI President
Jennifer Allen	Coral Shores Behavioral Health
Joan Baldwin Hoffpauir	Martin County Sheriff's Office
Katie Alonzo	Public Defender's Office
Marilynn McQueen	Treasure Coast Homeless Services Council
Matt Fritchie	Martin County Sheriff's Office
Michelle Derrico	Public Defender's Office
Michelle Miller	Martin County Health and Human Services
Michelle Villwock	Martin County School District
Philip Ratchford	Martin County Health and Human Services
Quintina Harris	Martin County School District
Rhonda Irons	Martin County Sheriff's Office
Robert Howard	Martin County Sheriff's Office
Robert Thomas	New Horizons/Mental Health Court
Sharyn Krim	Martin County Health and Human Services
Tammy Macklin	New Horizons/Mental Health Court
The Honorable Judge Waters	Martin County Judiciary
Walter Aitu	Martin County Veteran Service Officer
Yuri Parraga	Martin County Health and Human Services

Appendix B: Resources

Web Resources and Partners

Criminal Justice, Mental Health, and Substance Abuse Technical Assistance Center (CJMHSATAC)	http://www.floridatac.org/
Baker Act Reporting Center	http://bakeract.fmhi.usf.edu/
Louis de la Parte Florida Mental Health Institute- Department of Mental Health Law and Policy (MHLPL)	http://www.usf.edu/cbcs/mhlp/
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://www.addiction.com/a-z/samhsas-national-clearinghouse-for-alcohol-and-drug-information/
Recovery and Recovery Support	https://www.samhsa.gov/find-help/recovery
SAMHSA Grant Announcements	https://www.samhsa.gov/grants/grant-announcements-2019
Evidence-Based Practices Resource Center	https://www.samhsa.gov/ebp-resource-center

Other Web Resources

Bureau of Justice Assistance	https://www.bja.gov/default.aspx
Council of State Governments (CSG)	http://www.csg.org/
CSG Justice Center	https://csgjusticecenter.org/

Florida Behavioral Health Association	https://www.fadaa.org/page/FBHA
Grant Opportunities	http://www.grants.gov/
National Alliance for the Mentally Ill (NAMI)	http://www.nami.org/
National Alliance to End Homelessness	http://www.endhomelessness.org/pages/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.ncjrs.gov/
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/