Osceola County, Florida Sequential Intercept Mapping Report

October - November 2021



UNIVERSITY of SOUTH FLORIDA

College of Behavioral & Community Sciences

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Osceola County SIM Report Abbreviations

Below is a list of abbreviations that may be helpful when reading the Osceola 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 |
| CJMHSA | Criminal Justice, Mental Health, and Substance Abuse |
| CJMHSA 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 |
| | |

Osceola County Abbreviations

| CFCHS | Central Florida Cares Health System (managing entity) |
|-------|---|
| MCSO | Osceola County Sheriff's Office |
| PSCC | Public Safety Coordinating Council |
| PSS | Peer Support Space |
| RCCF | Recovery Connections of Central Florida |

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Osceola 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 modified *Sequential Intercept Mapping* (SIM) held in Osceola County, Florida at The Osceola County Human Services Building on October 7, 2021 and the *Action Planning Workshop* convened on November 10, 2021 at Osceola County Corrections. 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 Osceola 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 Osceola County in achieving their goals

Background

The Criminal Justice, Mental Health and Substance Abuse Technical Assistance Center provides training and technical assistance consultation to grantees of the Department of Children and Families CJMHSA Reinvestment Grant Program. Upon request, the TAC also provides consultation to other communities that are exploring the intersect of behavioral health and justice systems. This SIM was conducted at the request of DCF to assist Osceola County with identifying opportunities for collaboration and shared priorities for systems change. Prior to the SIM Action Planning Workshop, Central Florida Cares Health System (CFCHS) was conditionally awarded an implementation grant for Osceola County with a focus on reentry. The SIM will serve to inform implementation of the reinvestment grant and present additional priorities of focus for Osceola County. The SIM provided Osceola 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 October SIM mapping was comprised of 30 participants representing cross-systems stakeholders including mental health and substance use treatment providers, human services, corrections, advocates, peers, law enforcement, county courts, and county commission. A smaller group of 17 stakeholders convened for the Action Planning Workshop in November. A complete list of participants is available in Appendix A at the end of this report. Katelind Melendez, Eryka Marshall, and Abby Shockley representing the University of South Florida (USF) Criminal Justice, Mental Health, and Substance Abuse Technical Assistance Center (CJMHSA TAC) facilitated the mapping. Erica Goldstein assisted in the SIM planning process on behalf of DCF. Major Allison Jackson of Osceola Corrections Department 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 Osceola 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 Osceola County SIM map is on page 25 of this report.

Keys to Success

Existing Cross-Systems Partnerships

Osceola 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: Examples include:

- 1. Public Safety Coordinating Council
- 2. Osceola Recovery Project
- 3. Osceola County Community Vision

Representation from Key Decision Makers

The SIM included broad, cross-systems representation and key decision-makers. Opening remarks by Commissioner Ricky Booth and Major Allison Jackson, Osceola Corrections Department set the stage and established a clear message as to the importance of the mapping and the county's commitment to an action plan.

Osceola County Data Collection

The SIM opened with a presentation on the general SIM process and history, as well as a brief review of existing Osceola County data that contributes to understanding the needs and risk/protective factors associated with the target population. Prior to the mapping, the community pulled key indicator data that TAC staff and consultants reviewed and utilized to inform discussions and drive conversations throughout the process. This helps SIM facilitators to dedicate time during the mapping to validate information and explore the trends behind key indicators. Osceola County has access to a robust amount of data related to key criminal justice and behavioral health indicators. The importance of using existing information available to inform data-driven decision making and ongoing data review was discussed. Their commitment to doing so is evident through prioritization of data and information sharing in their action plan below.

Osceola 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 Osceola County SIM map, especially with regard to acronyms used on the map.

Intercept 0—Community Services

Prevention Efforts

211 operated by Heart of Florida United Way

- Serves Orange, Osceola, and Seminole Counties
- 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).
- 211 can connect callers to the Mobile Crisis Team operated by Devereaux.

Help Now Hotline

Park Place Crisis Line

Mobile Crisis Team (MCT) operated by Devereaux

- The MCT serves youth and young adults up to age 24.
- MCT responded to 89 calls (in the six months prior to the SIM).

IDignity Osceola

• IDignity assists individuals in obtaining identification.

Mental Health Association of Central Florida

• Serves Orange, Osceola, Seminole, Brevard, & Lake Counties

Hope Partnership

NAMI Greater Orlando

• Serves Orange, Osceola, and Seminole Counties

Recovery High School

<u>Strengths</u>

- The Chamber is in the process of updating the resource guide funded by Osceola County Housing and Community Services.
 - o Central Florida Reentry Network is also creating a resource packet.

Opportunities for Improvement

• There is need to provide more information to those reentering the community (providers, community members, families, consumers, and law enforcement).

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.
- It is rare for those who call 911 to request a CIT officer. It is more likely that an officer will determine it is a mental health crisis when they arrive to the scene.
- In the past 6 months (March 1 August 31, 2021), KPD received 359 mental health crisis calls (MH calls comprised 29% of calls to 911).

Law Enforcement

Osceola Sheriff's Office (OSO)

- New hires receive an 8-hour mental health training.
- It is the goal of OSO to have all officers attend the 40-hour CIT training.

Kissimmee Police Department (KPD)

- The majority of KPD officers and school resource officers are trained in Mental Health First Aid.
- Aside from CIT, officers receive training on de-escalation techniques.

St. Cloud Police Department

Osceola County Corrections Department (OCCD)

Crisis Intervention Teams (CIT) Training

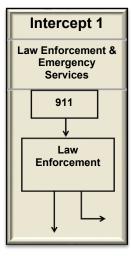
• Crisis Intervention Teams (CIT) training is available to all law enforcement officers, probation officers, and problem-solving court staff in Osceola County.

Table 1.

Summary of CIT Trained Officers

| Law Enforcement Agency | % of Officers Trained |
|---------------------------------------|--------------------------|
| Osceola Sheriff's Office (OSO) | 41% |
| Kissimmee Police Department (KPD) | 46% |
| St. Cloud Police Department (SCPD) | 60% |
| Osceola County Corrections Department | |
| (OCCD) | 32% |

Data for Table 1 was provided as a part of preliminary data indicators comprising measures in the 6 months prior to the SIM.



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.
 - 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 Park Place (Baker Act receiving facility).
 - 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 Osceola County Jail to be booked or transport to Park Place.
 - If an individual meets the criteria for an involuntary Baker Act examination and has committed a *felony offense*, the individual is transported to the Osceola County Jail and Park Place will be notified to come to the jail to conduct a Baker Act examination.
 - If an individual has committed an offense, but does not meet Baker Act criteria, the person is transported to the Osceola County Jail.
- Law enforcement provides all Baker Act transports in Osceola County.
- Between March and June 2021, there were 715 crisis center admissions. The average wait time for law enforcement officers was 5 minutes.
- According to the Baker Act Reporting Center at the University of South Florida, in FY2018-19, there were 3,357 involuntary Baker Act examinations of Osceola County residents (adults and youth); approximately 2,682 of those examinations were for adult residents.

Marchman Act

• Park Place Behavioral Health Care operates a detoxification unit and provides substance use services.

Crisis Services

Park Place Behavioral Health Care Crisis Stabilization Unit (CSU)

- Park Place is the Baker Act Receiving facility in Osceola County. They also operate the secure detoxification facility.
- Crisis Stabilization Unit
 - The CSU has 30 adult beds; 20 children's beds.
 - The average length of stay is 2.8 days.
 - Typically, the CSU is always at capacity.
 - If an individual is insured, they may be referred to another CSU.
- Addictions Receiving Facility (ARF)
 - The average length of stay is 3-5 days; 7-10 days for alcohol or Benzodiazepine use. Court is convened virtually for those under a Marchman Act Order.

Osceola Regional Hospital

• Upon request, law enforcement officers will transport individuals to Osceola Regional for an involuntary examination. Osceola Regional accepts overflow from Park Place when they are at capacity.

St Cloud Hospital

• Individuals who require a Baker Act examination will only go to St. Cloud Hospital if they require medical clearance.

Orlando VA Medical Center at Lake Nona

• Veterans who require a Baker Act examination may be transported to the VA.

Detoxification Services

Park Place Behavioral Health Care Substance Use Residential

- Park Place operates a short-term SUD residential program; 28-30 days
 - o 4 hours of therapy, 3 hours of supported services a day
 - All clients receive psychiatric evaluations, medication management
 - Can use as a bridge to Medication Assisted Treatment (MAT)
- Long-term substance use residential is 12-18 months
- Bridge Program
 - Peer recovery specialists and recovery support specialists visit the emergency departments to provide and offer services in Osceola and Marion Counties. The emergency department must request peer specialists to come to the hospital.

RASE Project

- The RASE Project is a recovery organization that provides peer recovery specialists and recovery support across Osceola County.
- The RASE Project collaborates with other counites and Advent Health to provide peer support.

Transition House

• The Transition House provides outpatient services for individuals with substance use disorders, mental health disorders, families, and children as young as 6 years old in St. Cloud and Kissimmee.

Aspire

• Provides outpatient substance use treatment in Osceola County

VA

• Provides residential and outpatient substance use treatment

Blackberry Center

• Private, provides residential detoxification services

Turning Point Counseling and Consulting, Inc.

• Provides outpatient mental health and substance use treatment

Recovery Connections of Central Florida (RCCF)

• RCCF operates a website (<u>https://www.rccfhelp.org/</u>) with resources for individuals and family members seeking recovery; provides resources for 4 counties

Strengths

- A majority of officers are CIT-trained.
- There is good collaboration between Park Place and the community.
- Park Place has county government and law enforcement support.
- Park Place is developing a Mobile Response Team to serve adults in Osceola County.

Opportunities for Improvement

- There is an opportunity to target the 40-hour CIT course to more deputies in OSO.
- There is not a place for individuals to go who are awaiting state hospital placement.
- There is an opportunity for greater collaboration between law enforcement, corrections, and the Rase Project.

Intercept 2—Initial Detention & First Appearance

Booking

Booking and Intake

- A nurse conducts a medical and mental health assessment at booking.
 - Screening tools: Patient Health Questionnaire (PHQ-9), Columbia-Suicide Severity Rating Scale (CSSR-S)
- Currently Armor is the correctional healthcare provider, but contract concludes in December 2021.

Table 2.

Summary of Jail Booking & Screening Data

| | Total # | % Positive Screened |
|-------------------------------|---------|------------------------|
| Jail Bookings | 3,144 | N/A |
| Jail Mental Health Screenings | 4,146 | 19-25% |
| Jail Substance Use Screenings | 462 | N/A |

Data for Table 2 was provided as a part of preliminary data indicators comprising measures in the 6 months prior to the SIM.

Pretrial Release

- Prior to first appearance, individuals will be screened by the Pretrial Release team using a Florida risk assessment (name of tool?) and also asked about their history of mental health and substance use problems.
- Pretrial Release works closely with the Public Defender's Office and the jail mental healthcare team to examine competency issues.
- Currently, Pretrial Release focuses on low-risk, non-violent offenders but there is an initiative to expand eligibility criteria to allow more individuals to participate.
- Pretrial Release provides recommendations on release. There is informal information sharing between Pretrial Release and the Judiciary regarding mental health problems.

Table 3.

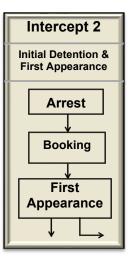
Summary of Pretrial Release Data

| | % Released |
|---|------------|
| Pretrial Release Rate of All Arrestees | 24% |
| Pretrial Release Rate of All Arrestees with MH Disorders | 19% |

Data for Table 3 was provided as a part of preliminary data indicators comprising measures in the 6 months prior to the SIM.

First Appearance

- The first appearance hearing occurs by way of video conference within 24 hours of arrest.
- The cutoff time is 3 a.m. for first appearance hearings and they see the judge the following day at 1:30 p.m.



- If the Public Defender's office is aware their client has a history of mental health problems, they will inform the judge at first appearance.
 - The Public Defender's Social Service Mitigation Office receives referrals from attorneys if their client has mental health needs. Then the office will request records from Park Place to confirm history of mental health needs and provide this information to Osceola County Jail.
- Recommendations for the problem-solving courts will also be made at first appearance.

Strengths

• The contract with Armor Correctional Healthcare concludes in December 2021 and the healthcare services will transition to be under the Osceola Corrections Department. The Corrections Department has created a team of a director with 4 mental health counselors.

Opportunities for Improvement

- There is an opportunity for the jail to receive guidance on screening tools in their transition from Armor to in-house correctional healthcare operations.
- There is a need for data/information-sharing between the jail and behavioral health providers to let community providers know when their clients are booked into the jail.
- The community identified a need for an expedited booking process, but the jail building and COVID-19 restrictions create barriers for expediting the process any further.
- Many individuals are under direct observation at the jail and this requires a great deal of staffing. There is a need for a specialized mental health unit in the jail.

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Intercept 3—Jails & Courts

Osceola County Jail

(Intercept 2 presents the jail booking and intake information)

- The average daily population at the time of the mapping was 560to-600 inmates. Prior to COVID-19, the average daily population was 850-to-950 inmates.
- The average length of stay for the pre-sentenced population is 25 days.
- For individuals with mental health problems, the average length of stay is 50-to-60 days.
- At the time of the mapping, it is estimated that about 25% of inmates have mental health problems.
- Approximately, 40% of the inmates in jail are on psychotropic medications at any given time.

Classification

• Classification conducts another screening after individuals have been in jail for 72-hours. They identify any needs of the individual, including mental health needs and notify individuals of the in-jail programs they may be eligible for. At classification,

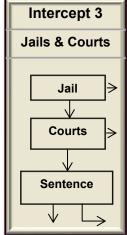
community providers/programs will visit the jail to assess inmate needs.

In-Jail Medical Services

- Armor Correctional Healthcare has provided in-jail medical services since 2014, but the contract concludes in December 2021. Medical services will transition to an in-house team.
 - With this transition, Osceola Corrections Department also budgeted for formal reentry planning.
- A psychiatrist comes to the jail once a week. An ARNP is present daily.
- Individuals may not stay on the same medications in jail as they were on prior to arrest. Medications are addressed on a case-by-case basis. Currently, the jail formulary is different from Park Place (primary behavioral health provider in Osceola County).
- However, if an individual comes from the state hospital, they will remain on the medications they were on prior to arriving at the jail.

In-Jail Services/Programs

- Vivitrol is provided by Park Place, first injection is given while individuals are in jail
- Evidence-based substance use program
- Parenting program
- GED program that provides a voucher for GED upon release from jail
- Back on Track Employment Program
- Religious Programs
- Emerge reentry program
- Telehealth
 - The jail provides inmates with tablets to access resources and attend programs virtually.
- Prior to COVID-19, the Osceola County Jail supported the following programs: Alcoholics Anonymous, Narcotics Anonymous, anger management classes, Thinking for Change, VA classes for veterans, Probation Toolbox, Women of Worth, and English as a Second Language (ESL).



Chaplain's Office

 The Chaplain's Office supports a jail reentry specialist who facilitates reentry initiatives with motivated inmates.

Problem-solving Courts

- There is an open referral process for all problem-solving courts.
- Anyone can make referrals for the problem-solving court programs and placement will be determined based on the need of the client. Referrals may be made for one program, but individuals may be eligible/fit best in another.
- Both felony and misdemeanor charges are accepted. However, there are different criteria for different programs.
- There is one Public Defender, one State Attorney, and judge that sit on all programs to support continuity over programs.
- There is a lead case manager for all courts.
- All community providers as well as probation attend court hearings.
- Problem-solving court dockets are not full.

Mental Health Court (MHC)

- At the time of the mapping there were fewer than 20 participants enrolled in the MHC, with capacity to serve up to 60.
- Individuals referred to the MHC must have a current mental health diagnosis (within last 6 months).
- Social workers in the Public Defender's Office can assist with coordinating mental health evaluations for MHC.
 - The Hope Partnership provides financial assistance for mental health evaluations.

Adult Drug Court

- At the time of the mapping, there were 30 participants in adult drug court, with capacity to serve up to 100 participants
- The Drug Court partners with multiple providers strategically located across the county: Aspire, Park Place, Transition House, Turning Point.
- Services include inpatient and outpatient treatment, detoxification services, and Medication-Assisted Treatment (MAT).

Veteran's Treatment Court (VTC)

- At the time of the mapping there were 112 participants in the VTC.
- VTC services are provided by the VA.

The State Attorney's Office supports diversion programs for prostitution cases, drug offenses, underage drinking, and driving under the influence.

Strengths

- There is strong institutional knowledge throughout Osceola County.
- The community "does more with less."
- There is strong community collaboration among providers, probation, and the courts.
- In the past year, there have been changes in the State Attorney's Office to a more rehabilitative approach. More individuals have become eligible for diversion opportunities and criminal history is not an immediate disgualifier.
- The State Attorney's Office has taken a more rehabilitative approach to the CJS.
- Vivitrol is provided in jail by Park Place

Opportunities for Improvement

- There is an opportunity to align jail medication formularies with Park Place.
- There is a need for a warm-hand off for those participating in in-jail GED classes.
- Corrections indicated a need for a step-down unit in the jail for individuals who are stabilizing before they return to general population.
- There is a need for additional mental health staff in the jail to provide counseling and support for those with mental health problems that are not yet acute.
- There is interest in implementing in-jail certification programs to assist individuals in obtaining employment once released from jail.
- There is an opportunity to facilitate mental health screenings in the jail to determine/meet eligibility requirements for the MHC.
- Problem-solving courts have the capacity to serve more individuals in Osceola County.
- Community education of problem-solving courts and available resources to the target population could be improved.
- There is potential for greater utilization of telehealth resources.

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Intercept 4—Reentry

Jail Reentry/Discharge Planning

Osceola County Jail Discharge

- If an individual is on psychotropic medications, upon release they will be given a prescription for 3 days of medications to be filled at Walgreens.
- Bus passes will be provided upon need.
- Most inmates are released in the evening.
- There is flexibility in release times if they are being released to community programs.
- The Reentry Tool (RT) and Community Supervision Tool (CST) are conducted before release.
- Warm hand off
 - Jail program specialists will call the programs and make a connection; not necessarily set an appointment but make the contact
- Program Specialists going into intake housing units after 72 hours and talk about the services available upon release or in the jail and complete reentry plans with all inmates in their assigned housing units.

Emerge

- Emerge is the jail reentry program for inmates who are the most motivated to change as well as those who score the highest in terms of needs when they are released.
- The ORAS risk assessment tool is used to determine level of need.
- On average, Emerge serves a new group of 10 inmates each month.
- The monthly class includes group and individuals case management and reentry planning.

Turning Point Counseling and Consulting, Inc.

- Turning Point supports a full-time Chaplain and assistant and Reentry Specialist.
- Upon inmate request, the Chaplain will meet with inmates to discuss needs and provide faith-based supports.

Back on Track Employment Services

 Back on Track provides an employment class at the jail focusing on changing the mindset of individuals during their time incarcerated. Upon release, individuals may participate in the Back on Track 4-hour Boot Camp program focusing on life and employability skills training and employment placement.

Probation Toolbox

• Prior to COVID-19, probation officers conducted class on what individuals could expect when they are on probation.

Strengths

- Central Florida Cares Health System in partnership with Osceola Corrections Department was conditionally awarded a DCF CJMHSA Reinvestment grant to support the Emerge Reentry Program.
- There is flexibility in release times if being released to community programs.

Opportunities for Improvement

• 96% of inmates are not sentenced. Therefore, it is difficult to determine their release date and conduct discharge planning.



- There is no shelter in the community, a place for individuals to go when they are released from jail.
- There is an opportunity for a warm hand-off with providers prior to release from jail to build relationships before they return to the community.
- There is a need for additional funding for medications.
- There is a need for additional residential treatment options in Osceola County.

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Intercept 5—Community Corrections

Probation

County Probation

- Problem-solving court case manager also serves as the case manager for those on misdemeanor probation.
- Average caseload 1:82
- Jail reentry staff formulates case plans based on ORAS assessment.

State Probation

- One probation officer serves Osceola County.
- Average caseload 1:60 (prior to COVID-19, average caseload 1:80-90)
- The Transition House is contracted to provide services for individuals on felony probation.

<u>Housing</u>

Osceola County Human Services

- Offers funding to support housing needs of individuals including security deposits and rent
- Osceola County Human Services is in the process of creating a permanent housing complex to house up to 30 individuals with plans to create 500-600 affordable housing units in the upcoming years.

Hope Partnership

- Hope Partnership is a nonprofit dedicated to assisting individual find affordable housing, to prevent homelessness.
- The Hope Partnership assists individuals with securing an ID and focus on the factors that prevent individuals from securing housing and provide referrals to community partners.

The Transition House

- The Transition House provides outpatient services for individuals with substance use disorders, mental health disorders, families, and children as young as 6 years old.
- Residential treatment program for males, up to 6 months
- Partial hospitalization program for both males and females
- Provides residential and outpatient substance use treatment in St. Cloud and Kissimmee; work release transition programs from prison system

Employment

CareerSource

Back on Track Employment Services

Back on Track provides an employment class at the jail focusing on changing the mindset
of individuals during their time incarcerated. Upon release, individuals may participate in the
Back on Track 4-hour Boot Camp program focusing on life and employability skills training
and employment placement.



Additional Resources

Osceola Recovery Project

- The Osceola Recovery Project is a drug free community coalition focused on youth drug prevention, education regarding substance use and recovery, fighting stigma, assisting with Narcan distribution to the public, directing people to resources in Osceola, and inspiring the community with stories of hope. They are currently striving to become a recovery "hub" for Osceola County in the near future to work alongside Recovery Connections of Central Florida. With this collaboration, they will be able to serve any Osceola County resident in finding the best resources for substance use and mental health treatment.
- Coalition meets second Tuesday of every odd numbered month at 2 p.m.

The RASE Project

• The RASE Project is a non-profit Recovery Community Organization made up of individual from the recovery community who are in long-term, sustained substance use recovery. RASE collaborates with jail programs to provide peer support in the Osceola County Jail.

Peer Support Space (PSS)

• Peer Support Space is a not-for-profit grassroots organization, led by and for those in recovery from mental illness, substance abuse, trauma, grief, or other obstacles to wellness.

Strengths

• Osceola County Human Services is in the process of creating a permanent housing complex to house up to 30 individuals with plans to create 500-600 affordable housing units in the upcoming years.

Opportunities for Improvement

- Explore need for a mental health probation caseload.
- Indigent Psychiatric Medication Program which is also known as the Indigent Drug Program only supports individuals for the first few months of each quarter and then the funding runs out. There is a need for additional funding to support medication needs of the target population.
- There is a lack of housing options for those with mental health and substance use disorders in Osceola County.
- There is a need for additional funding to support peer specialists.
- Osceola County does not have an emergency shelter.

Osceola County Action Plan

Based on the SIM discussion and the opportunities for improvement discussed at the end of the one-day modified SIM, the CJMSHA TAC developed a list of potential priority areas to vote on for Osceola County with input from participants. Participated voted online by way of a Qualtrics survey. Results of the Qualtrics survey are presented below:

Table 4.

Priority Voting Survey Results

| Opportunity | # Votes |
|--|------------|
| Community Awareness & Education (resource guide/hub; build on work by the chamber and vision; leverage provider education during CIT; resource awareness among all providers, community organizations, law enforcement, and corrections) | 12 |
| Care Coordination (following Baker Act / jail reentry) | 10 |
| Peer Support Services (Infrastructure, Engage RASE, Osceola Recovery Project) | 9 |
| Formalize Existing Relationships to Promote Data and Information Sharing. (MOUs among Court, LE, providers, corrections) | |
| Formalized Jail Reentry / Discharge Planning | 5 |
| Need for Respite following a Baker Act | 3 |
| Access / Funding for Medications (FQHC funding / SAMHSA grant opportunities) | 2 |

Action Planning Process

Following the identification of the top priorities through the Qualtrics survey, the Action Planning Workshop convened on November 10, 2021, one month after the October 7th mapping. The top 4 priority areas are included in the action plan:

- 1. Community Awareness & Education
- 2. Care Coordination
- 3. Peer Support Services
- 4. Formalize Existing Relationships to Promote Data and Information Sharing

During the action planning workshop, participants were split into breakout groups to brainstorm objectives and action steps for each priority area. Then, each breakout group shared their work on the assigned priority area with the larger group and participated in an open discussion. This process encouraged participants to set realistic timelines and expectations for each objective, as well as established ownership of the Action Plan. 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).

| Objective | | Action Step | Who | When | |
|-----------|---|--|---|-----------------------|--|
| 1.1 | Create an inventory of resources and guides to provide resources for law enforcement and providers to refer to when linking individuals to services. | To identify format/medium for resource inventory and explore BAND mobile application To meet with Warren Hoagland representing Osceola County on Aging to discuss BAND mobile application (to leverage their existing platform to share resources) To identify organization to take ownership of resource inventory, who will maintain and regularly update for the community To incorporate efforts by the Community Vision and Osceola County Housing and Community Services who have previously developed resource lists | PSCC Reentry Subcommittee Osceola County Corrections Department Osceola County Housing and Community Services Osceola County School District | Within 180 days | |
| 1.2 | Create a collaborative resource guide. | To explore digital and paper options for a resource guide To identify needs for patrol officers To explore opportunities to disseminate resource guide during CIT training course | PSCC Reentry Subcommittee Osceola County CIT Coordinators | Within 180 days | |

| Obje | ective | Action Step | Who | When |
|------|---|--|---|--|
| 2.1 | Research care coordination best practices in other jurisdictions. | To understand approaches to care coordination To identify program components needed for target population | Park Place and community partners | Within 90 days |
| 2.2 | Research grant opportunities for aftercare resources. | To develop grant writing collaborative among agencies to develop shared proposals | | 3 – 6 months following initial research |
| 2.3 | Coordinate plans for release following a Baker Act. | To establish transition plan from mental health facility to independent living To identify providers responsible for each step of the transition plan | Mental health professionals Case managers Peer support specialists Public Safety Coordinating Council (PSCC) | 3 – 6 months following initial research |
| 2.4 | Identify learning needs of target population. | To identify opportunities to educate during jail reentry To conduct prerelease education and coordinate with case management | Osceola County Corrections Department Osceola County School District | Within 90 days |

| Objective | | Action Step | Who | When |
|-----------|---|--|---|--------------|
| 3.1 | Implement in-jail peer support services. | To look into connecting individuals to 1:1 peer supports within the first 24-48 hours in jail To explore opportunities to implement weekly and monthly peer support groups To prioritize topics or resources that promote resiliency | RASE Osceola Recovery Project Transition House | June 2022 |
| 3.2 | Establish a warm hand off with peers upon release from jail. | To explore transportation services from jail To establish meetings with peer support staff upon release from jail | RASE Osceola Recovery Project Transition House VA Park Place Faith-based organizations | ASAP |
| 3.3 | Explore opportunity to implement a 24-hour telephonic support line post- release | To set up a telephone number to call for crisis situations To develop a provision of relapse prevention through peers To leverage mobile crisis opportunity through Park Place | Park Place Law enforcement Faith-based organizations | Late 2022 |
| 3.4 | Develop weekly peer support groups. | To explore opportunity to implement weekly peer support groups in the community To develop virtual peer support groups through Peer Support Space | Park Place RASE | |

| Obje | ective | Action Step | | Who | When |
|------|--|-------------|---|-----------------------------------|-------------------|
| | | | o establish in-person substance use peer support groups nrough RASE | | |
| 3.5 | Explore feasibility of a drop-in center or recovery hub. | | o research drop-in center and recovery hub models to see hat would work best for Osceola County | Osceola Recovery Project | |
| | | รเ รเ | o determine what the community wants for the center: upervised family visits, per support meetings, technology to upport seeking benefits assistance and submission of job pplications | | |
| | | | o explore SAMHSA recovery funding opportunities to upport a drop-in center or recovery hub | | |
| 3.6 | Identify needs and interests of pre-release individuals to | | o gauge interest in educational opportunities among mates | Osceola County Corrections | Within 90 days |
| | develop credentials. | • To | o explore CDL program exploration | Department | |
| | | | o seek grants to develop better reentry supports relating to ducation | Osceola County School District | |
| | | • To | o go on "field trips" to learn about other reentry programs | | |

| Priority Area 4: Formalize Existing Relationships to Promote Data and Information Sharing | | | | | |
|---|---|--|--|----------------------|--|
| Objective | | Action Step | Who | When | |
| 4.1 | Inventory community services. | To assign agency to collect and identify necessary data elements To develop data and information sharing subcommittee | PSCC | Within 90 days | |
| 4.2 | Map inventory of existing MOUs among agencies. | To demonstrate the importance of formalized relationships and encourage MOUs To identify small changes to existing MOUs to facilitate information sharing To contact agencies and document existing MOUs | Major Allison Jackson | Next PSCC meeting | |
| 4.3 | Develop a hub of services for 24/7 access to provide diversion opportunities. | To identify the community need (aside from 211) To identify staffing and financial resourcing needs to support 24/7 hub | PSCC Osceola Corrections Department | | |
| 4.4 | Promote mobile crisis teams within the community (KPD and Park Place MCTs). | To establish process for information sharing regarding follow-up and engagement after contact with mobile crisis teams To explore opportunities for 24/7 wraparound services | Park Place PSCC | | |
| 4.5 | Develop targeted services based on community needs. | To develop infrastructure to connect people to services based on their individual needs To determine the feasibility of ensuring that case management services are available to individuals 24/7 | Osceola Corrections Department | | |

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.

- 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 are extensive, resulting in longer waiting periods. The community should explore solutions to this barrier
- There is substantial need for peer services and apparent momentum and interest in the development of a recovery community organization or drop-in center. Explore funding opportunities through CFCHS for RCO development and develop a peer support subcommittee to drive discussions around this opportunity.

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 Osceola County for further discussion include:

- Engagement and support for individuals experiencing chronic homelessness
- Resources dedicated to the Poinciana area of Osceola County
 - Review data to determine the number of individuals from Poinciana who fit in a "high-risk" category to assess need

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:

Community Collaboration

- Leverage informal supports in the community. Throughout the SIM, numerous recovery organizations were highlighted. There is an opportunity to build on existing efforts by RASE and Osceola Recovery Project to start the discussion on engaging more peers and increasing capacity for peer specialists within Osceola County.
- 2. It is evident that a major strength in Osceola County is the community relationships. However, it was disputed that there is not a comprehensive inventory of resources that exist across the behavioral health and justice systems. In the past, the resource guide was managed by the Vision and currently one is underway though funding from Osceola County Human Services by the Chamber, but it is important that the community resource guide has a home. Explore the possibility of the resource guide to lie within the Reentry Subcommittee of the Public Safety Council Coordinating Committee, to ensure there is a point of contact when updates need to be made and individuals need access to the most up-to-date list.
- 3. We listened to stakeholders say thorough the mapping workshop that folks in Osceola County, "do more with less." It is so evident that there are strong cross systems relationships among community organizations, providers, law enforcement and corrections. It is important that these relationships are formalized rather than lying within a person it should live within a position or among organizations. Formalizing these relationships through Memorandums of Understanding (MOUs) will set the groundwork for future grant applications and demonstrate to funders that cross-systems community collaboration is strong across behavioral health and justice systems.
- 4. There is an opportunity to engage the local federally qualified health center (FQHC), Orange Blossom Family Health Center in future planning efforts for the target population of adults with mental health, substance use, and/or co-occurring disorder involved in the justice system. FQHCs receive federal funding that can address the needs surrounding funding for psychotropic medications for the target population.
- 5. Determine if there is a need to develop a data subcommittee to manage data related to the target population of individuals with behavioral health problems and justice involvement. The data subcommittee may identify data elements that would assist in making data-informed decisions as well as serve to inform CFCHS for quarterly grantee reports.

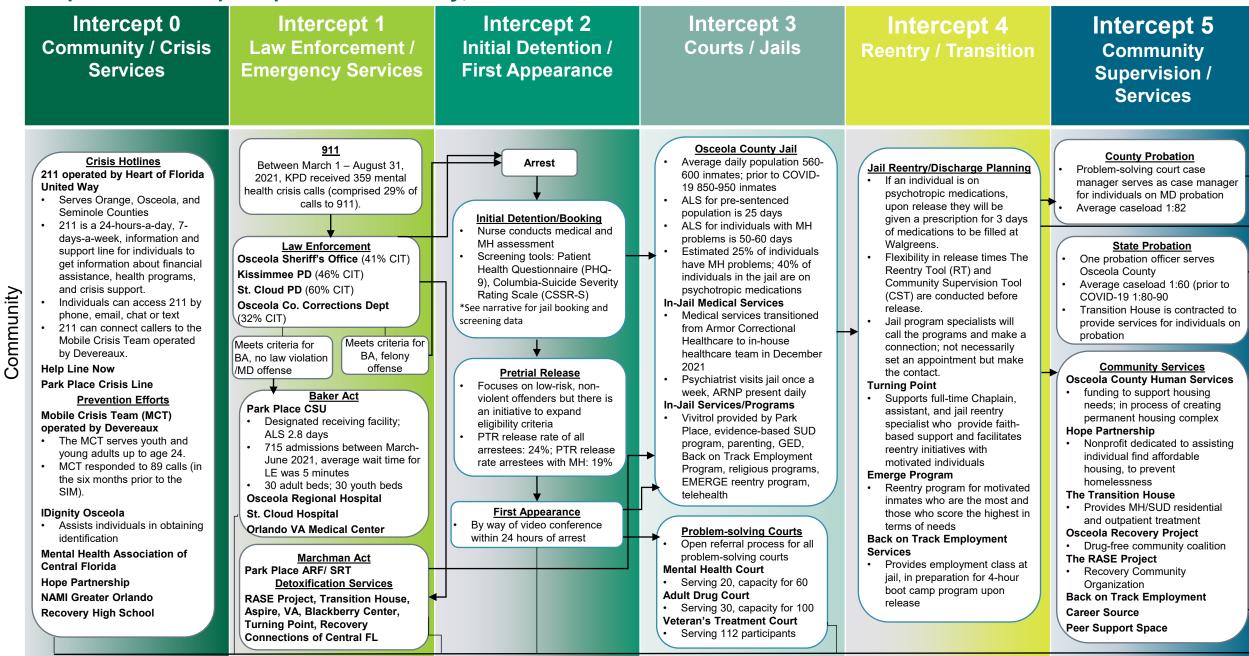
Jail / Reentry

6. Crosswalk the SIM priority areas with the Osceola County reinvestment grant proposal as there is potential to serve dual goals through the proposed reinvestment grant program by embedding priorities into grant activities.

- Consider reviewing the <u>Assess, Plan, Identify, and Coordinate (APIC) Model</u> for jail reentry. The APIC Model is a best practice toolkit that presents guidelines and strategies to serve dual goals of individual recovery and risk reduction for individuals with behavioral health disorders in the justice system.
- 8. Additionally, at reentry there is an opportunity to leverage telehealth to facilitate a warm hand-off or connect individuals with their community providers in order to establish a relationship prior to release back into the community. Stakeholders at the SIM mentioned that telehealth was used briefly in the Osceola County Jail, but really leveraging this technology may help to improve and maintain treatment engagement.
- 9. Explore jail policies across the State of Florida regarding standardized release hours/times to move away from releasing individuals in the evening hours.
- 10. Throughout the mapping, it was discussed that there will be a transition to a new internal correctional healthcare team, beginning in December 2021. Along with this transition, consider increasing the number of days of medications that individuals receive upon release from jail. Funding for this increase may be accomplished through pursuing national and state grant opportunities.

For information or clarification regarding this SIM, action plan, and report, contact: Abby Shockley, Director, CJMHSA TAC, <u>ashockley1@usf.edu</u> Katelind Melendez, Assistant Program Director, CJMHSA TAC, <u>katelind@usf.edu</u> Please visit the USF CJMHSA Technical Assistance website at <u>www.floridatac.org</u> Sponsored by DCF Contract # LH816

Sequential Intercept Map: Osceola County, Florida



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Community

Appendix A: Participant Lists

October 7, 2021: Mapping Workshop

| Name | Organization |
|--------------------------|---|
| Ashley Zuniga | Public Defender's Office |
| Brianna Godwin | Osceola County Corrections (Reentry) |
| Captain James Spain | Osceola County Sheriff's Office |
| Celestia McCloud | Osceola County Human Services |
| Francine Williams | Osceola County Human Services |
| Crystal Allen | State Attorney's Office |
| Crystal Hernandez | The Transition House |
| Daisy Mendoza | Osceola County Corrections (Mental Health) |
| Erica Goldstein | Suncoast Region Community Forensic Liaison, DCF |
| Geline LaGrace | Park Place Behavioral Health |
| Holly Dorman | Osceola County Corrections (Community Corrections; Probation and Pretrial Release) |
| Jill Poffenbaugh | Community Hope Center |
| Joanne Turner | Turning Point Counseling Inc. |
| Karen Combs | Osceola County School District |
| Leigh-Ann Cuddy | Osceola County Corrections (CIT) |
| Lieutenant James Napier | Kissimmee Police Department |
| Lieutenant Matthew Crego | St. Cloud Police Department |
| Lisa Barker | Florida Department of Corrections, Probation and Parole |
| Major Allison Jackson | Osceola County Corrections |
| Michelle Jones | Osceola County Problem Solving Courts |
| Natalie Mullett | Park Place Behavioral Health |
| Penny Dickerson | Park Place Behavioral Health |
| Sheila Moreno | Public Defender's Office |
| Christina Mayo | Turning Point Counseling |
| Tammy Fisher | Central FL Reentry Network/ Inside Out Jail Ministries |
| Jackie Murray | Back on Track |
| Jim Shanks | Park Place Behavioral Health |
| Michelle Arroyo | Central Florida Cares Health System |
| Todd Dixon | Aspire |
| Stephanie Smith | Central Florida Cares Health System |

November 10, 2021: Action Planning Workshop

| Name | Organization |
|-------------------------|---|
| Brianna Godwin | Osceola County Corrections (Reentry) |
| Crystal Hernandez | The Transition House |
| Daisy Mendoza | Osceola County Corrections (Mental Health) |
| Geline LaGrace | Park Place Behavioral Health |
| Holly Dorman | Osceola County Corrections (Community Corrections; Probation and Pretrial Release) |
| Jill Poffenbaugh | Community Hope Center |
| Joanne Turner | Turning Point Counseling Inc. |
| Karen Combs | Osceola County School District |
| Lieutenant James Napier | Kissimmee Police Department |
| Lisa Barker | Florida Department of Corrections, Probation and Parole |
| Major Allison Jackson | Osceola County Corrections |
| Penny Dickerson | Park Place Behavioral Health |
| Sheila Moreno | Public Defender's Office |
| Christina Mayo | Turning Point Counseling |
| Jackie Murray | Back on Track |
| Jim Shanks | Park Place Behavioral Health |
| Michelle Arroyo | Central Florida Cares Health System |

Appendix B: Resources

Web Resources and Partners

| Criminal Justice, Mental Health, and Substance Abuse Technical Assistance Center (CJMHSA TAC) Baker Act Reporting Center | http://www.floridatac.org/ http://bakeract.fmhi.usf.edu/ |
|---|---|
| Louis de la Parte Florida Mental Health Institute- Department of Mental Health Law and Policy (MHLP) | 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) Center for Mental Health Services

Center for Substance Abuse Prevention Center for Substance Abuse Treatment Homelessness Programs and Resources National Center for Trauma Informed Care (NCTIC) National Clearinghouse for Alcohol and Drug Information

Recovery and Recovery Support SAMHSA Grant Announcements https://www.samhsa.gov/

https://www.samhsa.gov/about-us/who-we-are/officescenters/cmhs https://www.samhsa.gov/about-us/who-we-are/officescenters/csap https://www.samhsa.gov/about-us/who-we-are/officescenters/csat https://www.samhsa.gov/homelessness-programsresources https://tash.org/nctic/

https://www.addiction.com/a-z/samhsas-nationalclearinghousefor-alcohol-and-drug-information/ https://www.samhsa.gov/find-help/recovery

https://www.samhsa.gov/grants/grant-announcements-2019 https://www.samhsa.gov/ebp-resource-center

Other Web Resources

Resource Center

Evidence-Based Practices

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

https://csgjusticecenter.org/

Florida Behavioral Health Association Grant Opportunities National Alliance for the Mentally III (NAMI) National Alliance to End Homelessness National Center for Cultural Competence National Council for Behavioral Health National Criminal Justice Reference Service National Institute of Corrections National Institute on Drug Abuse Office of Justice Programs Office of Juvenile Justice and Delinguency Prevention (OJJDP) U.S. Department of Health and Human Services - Mental Health U.S. Department of Veterans Affairs - Mental Health

United State Interagency Council on Homelessness

https://www.fadaa.org/page/FBHA

http://www.grants.gov/

http://www.nami.org/

http://www.endhomelessness.org/pages/housing_first

https://nccc.georgetown.edu/

https://www.thenationalcouncil.org/

https://www.ncjrs.gov/

http://nicic.gov/

https://www.drugabuse.gov/

https://ojp.gov/

https://www.ojjdp.gov/mpg

https://www.mentalhealth.gov/

http://www.mentalhealth.va.gov/

https://www.usich.gov/