

Putnam County, Florida

Sequential Intercept Mapping Report

September 19-20, 2023



UNIVERSITY of
SOUTH FLORIDA

College of Behavioral & Community Sciences

Criminal Justice, Mental Health, and
Substance Abuse Technical Assistance Center

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Putnam County SIM Report Abbreviations

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

AA	Alcoholics Anonymous
AOT	Assisted Outpatient Treatment
ARF	Addictions Receiving Facility
A-STEP	Academic Support through the Employment Process
BA	Baker Act
BAYS	Bay Area Youth Services
BRAVE	Be Resilient and Voice Emotions
CAT	Community Action Team
CAT	Community Assessment Tool
CCA	Community Coalition Alliance
CFLC	Creating Family Connections
CHS	Children's Home Society
CINS/FINS	Child in Need of Services, Family in Need of Services
CIT	Crisis Intervention Team
CJMHSa TAC	University of South Florida Criminal Justice, Mental Health, and Substance Abuse Technical Assistance Center
CPC	Community Partnership for Children
CRT	Community Reentry Team
CSU	Crisis Stabilization Unit
CTTU	SMA Crisis Triage and Treatment Unit
DCF	Florida Department of Children and Families
DJJ	Department of Juvenile Justice
DRAI	Detention Risk Assessment Instrument
E/BD	Emotional/Behavioral Disorder
FACT	Forensic Assertive Community Treatment Team
FDC	Florida Department of Corrections
FQHC	Federally Qualified Health Center
HEROS	Helping Emergency Responders Obtain Support Program
HRDS	Human Resources Development Services
JDAP	Juvenile Diversion Alternative Program
JPO	Juvenile Probation Officer
LE	Law Enforcement
LEO	Law Enforcement Officer
LPN	Licensed Practical Nurses
MA	Marchman Act
MAT	Medication-assisted Treatment
MH	Mental Health
MHFA	Mental Health First Aid

MRT	Mobile Response Team
NA	Narcotics Anonymous
NAMI	National Alliance on Mental Illness
PAL	Police Athletic League
PCSO	Putnam County Sheriff's Office
PDO	Public Defender's Office
PSCC	Public Safety Coordinating Council
PTR	Pretrial Release
PUO	Pick Up Order
RAP	Residential Adolescent Program
RCO	Recovery Community Organization
RN	Registered Nurses
ROR	Release on Own Recognizance
SAMH	Substance Use and Mental Health
SAMHSA	Substance Abuse and Mental Health Services Administration
SAO	State Attorney's Office
SAYS	St. Augustine Youth Services
SEDNET	Multiagency Network for Students with Emotional/Behavioral Disabilities
SIM	Sequential Intercept Mapping
SMA	SMA Healthcare
STRIVE	Supportive Trusting Relationships with Inclusion, Vision, and Empathy
SUD	Substance Use Disorder
TFCBT	Trauma Focused Cognitive Behavioral Therapy
TIEH	Treatment of Individuals Experiencing Homelessness
USF	University of South Florida
VA	U.S. Department of Veterans Affairs
VTC	Veteran's Treatment Court
WRAP	Wellness Recovery Action Program

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

Introduction

This report provides a summary of the *Sequential Intercept Mapping* (SIM) convened in Palatka, Florida at the Price Martin Center on September 19-20, 2023. The SIM provided a strategic plan for a targeted population, namely adults and juveniles with mental health and/or substance use disorders involved in the justice system in Putnam 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 and juvenile justice systems.

This report includes:

- A brief review of the background for the SIM
- A summary of the information gathered at the SIM, presented by intercept
- An adult and juvenile 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 Putnam County in achieving their goals

Background

The Criminal Justice, Mental Health, and Substance Abuse Technical Assistance Center (CJMHSATAC) provides training and technical assistance consultation to grantees of the Department of Children and Families CJMHSATAC Reinvestment Grant Program. This SIM was conducted as a technical assistance request from grantee SMA Healthcare (LHZ99). The SIM will serve to inform the Putnam County reinvestment grant program and present priorities of focus for the Putnam County adult and juvenile target populations. The SIM provided Putnam 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
- Creation of a map of the current juvenile justice system indicating points of “interception” where diversion strategies and programs for youth 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 justice system
- Development of a strategic action plan to implement identified priorities that address criminal and juvenile justice diversion, reentry, and treatment needs of adults and juveniles with mental health and/or substance use disorders involved with the justice system

The Putnam County SIM mapping was comprised of 36 participants representing cross-systems stakeholders including judiciary court services, law enforcement, mental health and substance use treatment providers, human services, corrections, and advocates. A complete list of participants is available in Appendix A at the end of this report. Abby Shockley, Katelind Melendez, Beth Holland, and Eryka Marshall representing the University of South Florida (USF) CJMHSATAC facilitated the mapping. Nancy Russo with SMA Healthcare provided opening remarks and organized the logistics of the mapping.



Figure 1. Sectors Represented at Putnam County SIM

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 Mental 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 two comprehensive maps of how individuals with substance use and mental health disorders (SAMH) disorders flow through six distinct intercept points of the Putnam County criminal and juvenile justice systems: Community Services, Law Enforcement and Emergency Services, Initial Detention and First Appearance, Jails and Courts, Reentry, and Community Corrections (juvenile intercepts: Community and Crisis Services, Law Enforcement and Emergency Services, Initial Detention Screenings, Detention Placement, Court Hearings, Community Supervision, Residential Treatment, Transition, Reentry, and Aftercare).
- Identification of resources, gaps in services, and diversion opportunities at each intercept for individuals 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.

Keys to Success

Existing Cross-Systems Partnerships

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

- Behavioral Health Forum
 - Public Safety Coordinating Council
- Coalition for Prevention
- Palatka Housing Authority Integrated Services Meeting
- DJJ Council

Representation from Key Decision Makers

The SIM included broad, cross-systems representation and involved many key decision makers. Opening remarks established a clear message as to the importance of the SIM and commitment to an action plan. Throughout the event, remarks were provided by:

- The Honorable Judge Janesk, Seventh Judicial Circuit
- Courtney De Souza
- Nancy Russo, SMA

Putnam County Data Collection

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

Report Organization

This comprehensive report incorporates mapping information, community priorities, and action plans for both the adult and juvenile populations. Our approach to organizing this report allows for easy customization, enabling distinct planning groups within the community to extract and concentrate on either the adult or juvenile segment as needed. Stakeholders should be able to seamlessly navigate the table of contents to download all portions of the adult and/or juvenile event results. This will allow planning and implementation groups to access information tailored to their specific focus. This report is intended to serve as a flexible tool, empowering Putnam County to address the unique needs and challenges of both adult and juvenile populations effectively.

Putnam County Adult Sequential Intercept Map Narrative

This narrative reflects information gathered on September 19, 2023, during the adult mapping and often verbatim from the participants and/or local experts. This narrative is a reference guide to navigate the Putnam County SIM map, particularly as it relates to program specifics and acronyms used on the map.

Intercept 0—Community Services

Crisis Hotline

988 Suicide and Crisis Lifeline

- 988 will forward referrals to 911 dispatch or VA when appropriate.

Warmlines / Resource Lines

211 operated by United Way of Northeast Florida

- The 211 Call Center is operated out of Alachua County and is contracted to provide 211 information & referral services for Putnam County.
- In the Greater Northeast Florida Region, 211 is also a source for the First Responder Peer Support Program supported by Children’s Home Society and funded by Florida Department of Children and Families and LSF Health Systems. The program offers one-on-one support, recurring virtual peer groups, family member guidance and support, and referrals to additional services.
- The top service requests (by category) according to 211 data over the past year (Oct 2022-Oct 2023) were 1) housing and shelter (rent assistance, shelters, low-cost housing), 2) utilities, 3) food 4) healthcare and COVID-19, and 5) mental health and addictions (<https://nefl.211counts.org/>).

SMA Healthcare Access and Crisis Response Center

- SMA operates a 24/7 hotline accessible at (800) 539-4228. Individual may be referred to services or connected to the mobile response team (MRT) when appropriate.
- Call takers assess the situation, determine if telehealth is appropriate or refer the individual within an hour.
 - The average response time depends on where the person is calling from.
- Bachelor’s level and master’s level personnel take calls and operate the crisis line with a master’s level clinician acting as the program director.
 - A clinician does not always respond to calls.
- The Access line can make referrals to the mobile response team (MRT) or link callers to a therapist on the phone immediately.
 - If the MRT is referred, there is a follow-up call within 30 days.

Meridian Behavioral Healthcare Referral Line

- Meridian operates an information and referral call line accessible at (800) 330-5615.
- Individuals may receive information or assistance with crisis stabilization unit availability, (CSU), detoxification, Baker Act & Marchman Act, family member rights, and coping activities.

LSF Health Systems Access to Care Line

- The LSF Access to Care Line (877) 229-9098 operates 24 hours a day, 7 days a week and provides referrals and information for mental health counseling. It is not a crisis line but does provide warm hand offs to services when possible.



Crisis Services

MRT operated by Children’s Home Society (CHS) (Intercepts 0 & 5)

- The MRT provides mental health support for youth and adults in Putnam County. The MRT may be accessed by way of telephone at (386) 872-2254 and is available 24 hours-a-day, 7 days-a-week.
- At the time of the mapping, the average MRT response time was 11 minutes and 5 seconds.
 - The goal is to help families remain stable as they navigate a mental health crisis.
 - To abide by F.S. 394.495, the MRT will respond within an hour and go onsite to provide de-escalation, a risk assessment, and safety planning. Follow-up is also provided, including crisis counseling and a warm hand-off to resources such as mental health counseling, targeted case management, and psychiatric services.
- The MRT is comprised of 3 master’s level staff, supervised by a licensed clinician.

Table 1.

Summary of CHS Mobile Response Team Data (July 1, 2022-December 31, 2022)

	MRT
# of Calls Received (count)	98
# Repeat Calls	39.8% (39/98 calls)
Average Response Time	11 minutes, 5 secs.
# of Face-to-Face Episodes	56
# Face to Face Episodes, Treated in Place	55.4% (31/56 episodes)

Community Supports

CHS Putnam County Wellness Center (Intercepts 0 & 5)

- The Wellness Center is a community hub created in collaboration between Children’s Home Society of Florida (CHS), LSF Health Systems, and Care Connect+ of UF Health St. Johns.
- The Wellness Center provides mental health and substance use services for adults and children as well as promotes referrals to community partners for services.
- Services include individual and family therapy, professional clothing closet, food pantry, telehealth, insurance assistance, support and guidance for pregnant women through Healthy Start, and more.
- The Wellness Center is open for walk-ins Tuesday-Thursday from 9 a.m. to 4 p.m. and available by phone 24/7 at 386-481-3471 or email at putnamwellnesscenter@chsfl.org.

Recovery Point Recovery Community Organization (RCO) (Intercepts 0 & 5)

- Recovery Point became an RCO in 2022.
- Recovery Point offers recovery support services to individuals and their families, peer support, recovery groups, linkages to resources, telephone recovery support, family support, a clothing closet, Celebrate Recovery, and access to Narcan.
- Recovery Point provides recovery support program in the Putnam County Jail through the Insight Recovery Program as well as Celebrate Recovery Inside, relapse prevention, Seeking Safety, and All Recovery.

SMA Healthcare Drop-in Center (Intercepts 0 & 5)

- The drop-in center provides adults with mental health issues an opportunity to socialize with others, learn new skills, and participate in various activities between Monday-Friday from 8:30 a.m. to 4:30 p.m. There is no appointment necessary and no fees associated with services.
- SMA Healthcare offers community education, groups, presentations (such as Baker Act information), and more for the community.

Patients Not Prisoners (Intercepts 0 & 5)

- Patients Not Prisoners is a nonprofit organization that provides advocacy, education, and support for first responders and families that provide support to individuals with mental illness.
- Patients Not Prisoners represents the community and those that we seek to serve in the planning and implementation of Mental Health Courts.
- They are partnered with Better Help to provide therapy vouchers at no cost.

Community Coalition Alliance (CCA)

- The CCA works on collaborating with community coalitions around the State of Florida. The focus is to provide direct efforts on individual neighborhoods and communities while committed to sharing resources, best-practices, training, and mentoring.

CareerSource Northeast Florida (Intercepts 0 & 5)

- CareerSource provides in-person and virtual employment assistance.

Goodwill North Florida (Intercepts 0 & 5)

- Goodwill is a second-chance employer that offers vocational, educational, and employment opportunities.
- The A-STEP program provides adults in North Florida access to obtain a first degree, technical credentials, or certifications, with one-on-one support. A-STEP serves adults in Duval, Nassau, Clay, Flagler, St. Johns, Putnam, and Baker Counties. Eligibility requirements: be at or below the 300% national poverty guidelines, 18+, have a high school diploma or GED, be a US citizen/legal resident, and willingness to participate in case management services, financial literacy, and retention services for up to 90 days post-graduation.

Youth and Family Tree operated by SMA Healthcare

- The Youth and Family Tree Program provides prevention/education as well as counseling in the community for ages 16-25 and their families. This is for co-occurring MH/SU treatment.

Strengths

- The community is looking into creative funding opportunities such as the HOPE grant that would assist with transportation concerns.
- Meridian received a SAMHSA grant for the Treatment of Individuals Experiencing Homelessness (TIEH).
- Putnam County is looking into boosting the infrastructure of internet services to the more rural areas. This may assist in addressing access to telehealth.
- Second chance employers in the community are strong partners.

Opportunities for Improvement

- Transportation continues to be a barrier for clients to receive services.
- South Putnam County experiences difficulty in access to services. The community may want to explore development of satellite centers and shared staff models to help alleviate some of the division of resources.
- NAMI may be a potential partner to engage that would provide additional assistance with community awareness and stigma reduction.

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Intercept 1—Law Enforcement & Emergency Services

Emergency Services and 911

911 operated by PCSO

- Dispatchers have limited mental health training and will connect with law enforcement or MRT depending on availability.

Law Enforcement

Putnam County Sheriff's Office (PCSO)

Crisis Intervention Teams (CIT) Training

- Mental Health First Aid (MHFA) is provided to most of the PCSO employees upon hire and 40-hour CIT training.
- At the time of the mapping, St. Johns River State College hosts CIT trainings using salary incentives to encourage participation.
- MHFA training is provided by SMA Healthcare.
- The HEROS program support Narcan distribution among deputies.

Municipal Law Enforcement

- Palatka Police Department
- Crescent City Police Department
- Welaka Police Department
- Interlachen Police Department

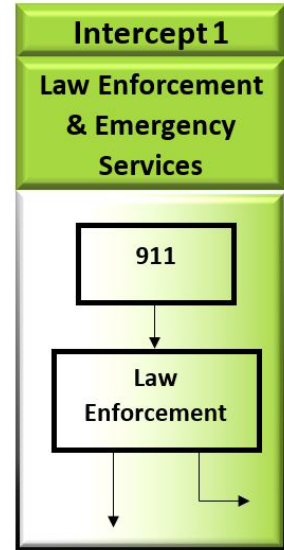


Table 2.

Summary of Putnam Sheriff's Office MH Calls & CIT Training

PCSO	06/2022-12/2022
LEO trained in specialized response (e.g. CIT), percent of sworn (%)	53%
# MH Calls handled by trained LE	60
MH crisis calls handled by trained LEO, percent (%)	50%

Crisis Services

Baker Act/Marchman 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.).
 - Law enforcement may provide initial transport to CTTU or meet CTTU vehicle to pick up an individual requiring transport to the nearest Baker Act receiving facility.
 - Individuals will be placed in restraints upon transport.

Crisis Triage and Treatment Unit (CTTU) operated by SMA Healthcare

- The SMA CTTU provides transport for all involuntary examinations between the hours of 8 a.m. to 12 p.m. Outside of these hours, law enforcement provides transport.
- The goal is for LEO to hand off within 15 minutes.
- SMA collaborates with law enforcement agencies to provide support and transportation for individuals in crisis and is funded by the CJMHSR Reinvestment Grant Program.

Table 3.*Involuntary Baker Act Examinations by Receiving Facility*

Receiving Facilities	Involuntary Exams in FY 2021-2022 % County Total
Flagler Hospital	31.53%
Halifax Psychiatric Center – North	16.06%
UF Health Shands Psychiatric Hospital	11.85%
Meridian Behavioral Healthcare – Gainesville	9.64%
SMA Healthcare- Chet Bell Crisis Center	6.43%

Source: Baker Act Reporting Center FY 2021-2022 Annual Report, 2023

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

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

SMA Chet Bell Crisis Center (CSU & ARF)

- The Chet Bell Crisis Center is a Baker Act receiving facility in Volusia County. The CSU has 50 beds and the ARF has 19 beds.
- Individuals will receive medication, individual and group counseling, as well as discharge planning.
- From July 1, 2022 - Dec 31, 2022, 38 Putnam County residents were seen at CBCC for emergency screening, detoxification, or crisis stabilization.

Additional Baker Act receiving facilities accessed by Putnam County residents:

- Flagler Hospital
- Halifax Psychiatric – North
- UF Health Shands Psychiatric Hospital

Marchman Act

- Following the file of a petition, a hearing is established within 2 days and 90 days within the system.
- The magistrate will try to send locally for detoxification or treatment services.
- Individuals will be transported to Meridian or Chet Bell Crisis Center.
- SMA will receive any discharged paperwork when they transport the individual back to the community.

Strengths

- Engage RCO to assist with peer support for individuals with SUDs under a Marchman Act order.

Opportunities for Improvement

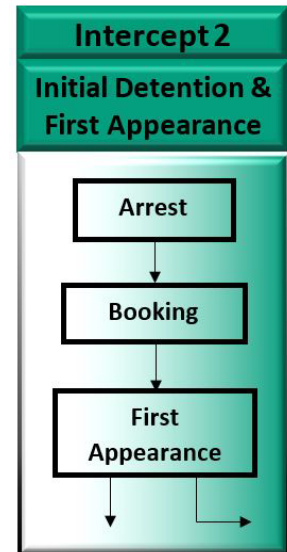
- There is a need and desire to have a residential detoxification facility for adults and juveniles.
- The staff capacity for dispatch is limited and therefore difficult to engage in training initiatives.
- The community would benefit from expansion of CTTU hours if funding permits.
- Establish collaboration with HCA Putnam Medical in order to pursue discharge planning for individuals released following a Baker Act.

Intercept 2—Initial Detention & First Appearance

Putnam County Jail Booking

Booking and Intake

- At booking, individuals receive a medical screening conducted by a correctional officer. Veteran status is also identified.
 - The jail conducts intake assessments, SAD Score Eval, an evaluation provided by a provider and a LMHC, and an assessment through the ACTS software for reentry.
- Between June 2022 and December 2022, there were 1615 jail bookings. Approximately 14% screened positive for MH and 18% screened positive for SU.
 - Individuals can self-report their medications and medications will be continued upon verification. Families can also submit information directly to the jail medical team on the PCSO website.
- At the time of the mapping, GENESYS Health Alliance was the jail medical provider, but the jail is in the process of a transition to an in-house medical staff beginning October 2023. The new staff will include a medical doctor 8 hours a week, one full-time (40 hours) mental health provider, and a 24-hour nursing staff.



First Appearance

- The first appearance hearing occurs virtually within 24 hours of arrest.
- The judiciary, Public Defender’s Office (PDO), and State Attorney’s Office (SAO) receive criminal history of individual. The PDO will make notes of any MH concerns and will meet with client before arraignment.
- Bond is set at this time.
- Pretrial release such as Release on Own Recognizance (ROR) is rare.

Strengths

- There is a form on the PCSO website under jail information and visitation for “Family Resources” that was created in collaboration with Patients not Prisoners. The form allows families and loved ones to email medical staff directly with information on prescription medications, allergies, primary care provider information, mental health diagnoses, or other pertinent information.
- With the medical staff transition, PCSO is exploring options to provide in-jail MAT services.
- The PDO works diligently with clients to identify mental health concerns and address appropriately.

Opportunities for Improvement

- Increase community awareness about the jail’s website to provide medical information for individuals in the system. At the SIM, participants expressed a desire around a HIPAA/42 CFR Part 2 compliant release for families to allow jail to share information on loved ones.
- There is an opportunity for earlier identification of the mental health and substance use needs of individuals in jail.
- Increase PCSO collaboration with VA social work department on notification/referral system (re: veterans not receiving their medications)
- Explore the feasibility of implementing evidence-based screening tools at jail booking.
- Involuntary outpatient treatment options may address needs addressed related to client buy-in for mental health treatment services.

Intercept 3—Jails & Courts

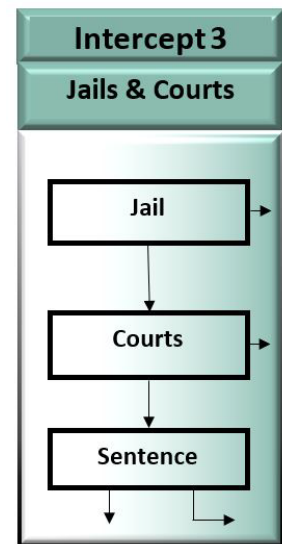
Putnam County Jail operated by Putnam County Sheriff's Office

- The jail has two recovery pods and a pod for individuals with medical needs.
- Meridian is in the process of executing new jail bridge program and will provides MAT services.
- There is a care coordinator that provides peer services.

In-Jail Programs

Programs/services include:

- Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) classes, Bible study, second chance employment opportunities, GED classes, parenting classes, batterers intervention, Wellness Recovery Action Planning (WRAP), substance use programming, and recovery support programming provided by Recovery Point RCO including Celebrate Recovery Inside, Relapse Prevention, Seeking Safety, and All Recovery
- In addition, there are employment trainings and partnerships established with the local landfill, animal control/shelter, Beck, Marco (food packaging), and Aramark as well as other local providers.



Courts

Problem-Solving Courts

Adult Drug Court

- The Adult Drug Court serves Circuit 7 (Flagler, Putnam, St. Johns, and Volusia Counties).
- Drug Court is a voluntary program lead by the Honorable Judge Elizabeth Morris and serves non-violent individuals with substance related felony charges who reside in Putnam County.
 - Drug Court has the capacity to serve 45 clients and the average length of the program is 18 to 36 months. At the time of mapping, the court was serving 20 participants.
 - Court appearances are held before a judge and referrals are primarily from jail.
- SMA provides screening and MAT services for participants, as well as referrals for additional services.
- Assistance with transportation (bikes provided) and assistance with driver's licenses are provided.
- Participants are required to partake random drug testing and check-ins from probation.

Veteran's Treatment Court (VTC)

- VTC operates in St. Johns and Putnam Counties.
- VTC is a voluntary program lead by the Honorable Judge McGillin, Jr. and serves individual that serves or has served in the U.S. Armed Forces, Reserves or National Guard; is a current or former U.S. Department of Defense Contractor; or is a current or former military member of a foreign allied country.
 - VTC has the capacity to serve 50 clients (will serve more if needed) and the average length of program is 12 to 18 months. At the time of the mapping, the court was serving 30 and 3 were Putnam County participants.
 - Referrals are primarily from the jail or VA social worker and first appearance documents are stamped as Veteran. VA social worker will provide evaluation to the court as needed.
 - Court meets every 2 weeks and last about 2 hours.

- The VTC was awarded a SAMHSA grant specifically to incorporate peer support for veterans and assist with care coordination and outpatient treatments.
- Treatment is provided primarily through the VA.

Strengths

- Researching and beginning to provide MAT services.
- Jail provides recovery pods in jail for individuals with extra needs.
- Working to bring “Jail Bridge” program (methadone/MAT) as an in-jail program.
- Researching ACTS software that would provide stats for individuals.

Opportunities for Improvement

- Possibility for Mental Health Court or to have St. Johns provide spots for individuals, as well as Homelessness court.
- Peer support could be leveraged within the jail and within the problem-solving courts.
- Drug Court could be utilized to full capacity.

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Intercept 4—Reentry

Jail Reentry/Discharge Planning

Putnam County Jail Reentry

- There is not a formalized jail reentry process for individuals reentering the community. However, there are plans for a reentry center and expansion of PSCO reentry designated staff.
 - Individuals on psychotropic medications are provided a 10-day supply of medications at release.
- SMA Healthcare conducts reentry planning for individuals with substance use disorders as a part of their 90-day SUD program. Planning begins 30 days prior to release and continues for 60 days post-release.
- SMA has embedded a person at the jail and provides a 90-day program for individuals with SUDs. The SMA staff assists 30 days prior to release and 60 days after release.

Prison Reentry

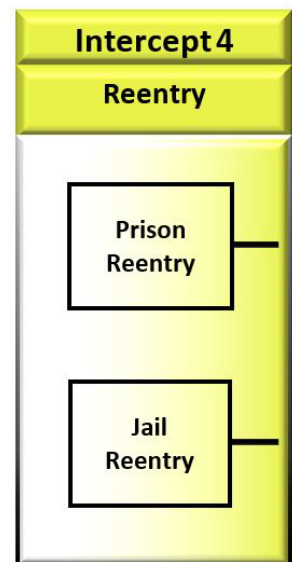
- Reentry planning from the Florida Department of Corrections (FDC) begins 180 days prior to release. FDC links to community providers and services when applicable.
- Individuals on psychotropic medications are provided with a 15-day supply of medications at release.

Strengths

- At the time of the mapping, PCSO recently secured a building for their reentry center. The reentry center is in the planning stages.
- There is strong collaboration among Goodwill and CareerSource to help with workforce barriers for individuals reentering the community from jail.
- SMA offers reentry planning for individuals with SUDs in jail.

Opportunities for Improvement

- Explore best practice models such as the Assess, Plan, Identify, and Coordinate (APIC) Model for reentry planning for individuals with mental health and substance use needs.
- Streamline linkages to resources and warm hand-off to community-based providers.



Intercept 5—Community Corrections

Community Supervision

County Probation provided by Human Resources Development Services

- HRDS supervises over 300 individuals on misdemeanor probation in Putnam County.

Florida Department of Corrections (FDC)

- At the time of mapping there were 1006 currently on state probation.
 - Approximately 33% (253/1006) are on drug offender probation supervision.
 - Three POs are assigned to drug offender probation in the Palatka office.

Crisis Services

Aza Health Federally Qualified Health Center (FQHC)

- Aza Health is the designated FQHC in Putnam County and provides mental healthcare, primary healthcare, dental healthcare and supports an on-site pharmacy.

Mobile Response Team (MRT) operated by Children’s Home Society (Intercepts 0 & 5)

- Refer to description in Intercept 0.

Community Supports

Putnam County Wellness Center provide by CHS (Intercepts 0 & 5)

- Refer to description in Intercept 0.

Florida Assertive Community Treatment (FACT) Team operated by SMA Healthcare

- Two FACT Teams serve the Seventh Judicial Circuit. FACT North serves St. Johns and Putnam Counties.
 - The FACT North has capacity to serve up to 100 clients.
- The FACT Team provides comprehensive support services to individuals who have a mental illness and have experienced multiple psychiatric hospitalizations.
 - Members of the FACT Team provide services including vocational rehabilitation, psychiatric assessments, individual therapy, nursing services, medication delivery, housing negotiation, nutrition and diabetes education, smoking cessation support and education, substance use treatment, and crisis assessment and intervention, 24 hours a day, 365 days a year.
 - The clients served by the FACT Team are discharged from the state hospital, the psychiatric unit at Flagler Hospital, or on judicial conditional release.

Patients not Prisoners (Intercepts 0 & 5)

- Refer to description in Intercept 0.

Peer Services

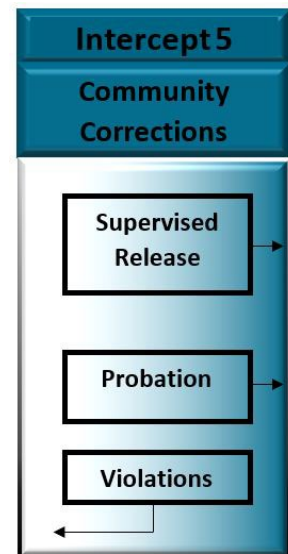
Recovery Point Recovery Community Organization (RCO) (Intercepts 0 & 5)

- Refer to description in Intercept 0.

Housing

Palatka Housing Authority

- At the time of the mapping, Meridian recently received a grant, Treatment of Individuals Experiencing Homelessness (TIEH) and looks to partner with Palatka Housing Authority



that has a waitlist of over 900 Putnam County citizens in need of housing.

First Presbyterian

- First Presbyterian is in the process of developing a solution to the shelter needs of the community. They have assembled a small group of community providers from behavioral health, local churches, and the County Commissioner to begin to explore starting a shelter with the hopes of continuing on to develop a plan for homelessness across the County.

Employment

CareerSource (Intercepts 0 & 5)

- Refer to description in Intercept 0.

Goodwill (Intercepts 0 & 5)

- Refer to description in Intercept 0.

Strengths

- There is strong collaboration among Public Defenders Office and HRDS, misdemeanor probation provider.
- Several local employers are willing to provide second chance employment to individuals reentering the community.
- Narcan vending machines are utilized throughout the county and all PCSO deputies carry Narcan.

Opportunities for Improvement

- Palatka Housing Authority is an advocate in the community and providing RAPID Rehousing options as they are available. However, at the time of the mapping there was a waitlist of over 900 for housing vouchers.
- Streamline and increase the resources awareness amongst providers.
- Explore opportunity to engage probation officers in future CIT trainings and other related law enforcement mental health training initiatives.

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Putnam County Priorities for Change

At the end of the mapping on day one, priority areas were determined through a voting process. Workshop participants were asked to identify a set of priorities followed by a vote, where each participant has three votes. Participants are not allowed to vote for the same priority more than once. The voting took place on September 19, 2023.

As a result of day one discussions, 10 goals/priorities emerged (Table 4). Only the top 3 of the 10 goals are addressed in the action plan (beginning on page 33), as they were voted most important by the group. However, the entire list of the ten goals/priorities is provided below to guide future planning efforts. The top three priorities / goals are identified in bold text.

Table 4.
Priority Voting Survey Results

Priority Area/Goal	# Votes
Community Awareness	17
Reentry Resource Center Planning	16
Training (re: target population)	9
Expansion of in county services	6
Explore Transportation Services	3
Involuntary Outpatient Models (ex. AOT)	3
Expansion of peer services	3
Mental Health Court	1
High utilizer care coordination	1
Increasing housing resources	0

The adult action plan is presented on page 33.

Putnam County Juvenile Sequential Intercept Map Narrative

This narrative reflects information gathered on September 20, 2023, during the juvenile mapping and often verbatim from the participants or local experts. This narrative is a reference guide to navigate the Putnam County Juvenile SIM map, especially program specifics and acronyms used on the map.

Intercept 0—Community Services

Crisis Hotline

988 Suicide and Crisis Lifeline

- 988 will forward referrals to 911 dispatch or VA when appropriate.

Warmlines / Resource Lines

211 operated by United Way of Northeast Florida

- The 211 Call Center is operated out of Alachua County and is contracted to provide 211 information & referral services for Putnam County.
- In the Greater Northeast Florida Region, 211 is also a source for the First Responder Peer Support Program supported by Children's Home Society and funded by Florida Department of Children and Families and LSF Health Systems. The program offers one-on-one support, recurring virtual peer groups, family member guidance and support, and referrals to additional services.
- The top service requests (by category) according to 211 data over the past year (Oct 2022-Oct 2023) were 1) housing and shelter (rent assistance, shelters, low-cost housing), 2) utilities, 3) food 4) healthcare and COVID-19, and 5) mental health and addictions (<https://nefl.211counts.org/>).



SMA Healthcare Access and Crisis Response Center

- SMA operates a 24/7 hotline accessible at (800) 539-4228. Individual may be referred to services or connected to the mobile response team (MRT) when appropriate.
- Call takers assess the situation, determine if telehealth is appropriate or refer the individual within an hour.
- Bachelor's level and master's level personnel take calls and operate the crisis line with a master's level clinician acting as the program director.
- A clinician does not always respond to calls.
- The Access line can make referrals to the mobile response team (MRT) or link callers to a therapist on the phone immediately.
 - If the MRT is referred, there is a follow-up call within 30 days.

Meridian Behavioral Healthcare Referral Line

- Meridian operates an information and referral call line accessible at (800) 330-5615.
- Individuals may receive information or assistance with crisis stabilization unit availability, (CSU), detoxification, Baker Act & Marchman Act, family member rights, and coping activities.

LSF Health Systems Access to Care Line

- The LSF Access to Care Line (877) 229-9098 operates 24 hours a day, 7 days a week and provides referrals and information for mental health counseling. It is not a crisis line but does provide warm hand offs to services when possible.

Florida Abuse Hotline operated by DCF

- The Florida Abuse Hotline (1-800-962-2873) accepts reports 24 hours a day and 7 days a week of known or suspected child abuse, neglect, or abandonment and reports of known or suspected abuse, neglect, or exploitation of a vulnerable adult.

Crisis Services*MRT operated by Children's Home Society (CHS) (Intercepts 0 & 5)*

- The MRT provides mental health support for youth and adults in Putnam County. The MRT may be accessed by way of telephone at (386) 872-2254 and is available 24 hours-a-day, 7 days-a-week.
- At the time of the mapping, the average MRT response time was 11 minutes and 5 seconds.
 - The goal is to help families remain stable as they navigate a mental health crisis.
 - To abide by F.S. 394.495, the MRT will respond within an hour and go onsite to provide de-escalation, a risk assessment, and safety planning. Follow-up is also provided, including crisis counseling and a warm hand-off to resources such as mental health counseling, targeted case management, and psychiatric services.
- The MRT is comprised of 3 master's level staff, supervised by a licensed clinician.

Table 5.*Summary of CHS Mobile Response Team Data (July 1, 2022-December 31, 2022)*

	MRT
# of Calls Received (count)	98
# Repeat Calls	39.8% (39/98 calls)
Average Response Time	11 minutes, 5 secs.
# of Face to Face Episodes	56
# Face to Face Episodes, Treated in Place	55.4% (31/56 episodes)

Community Action Treatment (CAT) Team operated by Clay Behavioral Health Center (Intercepts 0 & 5)

- The CAT Team provides assessment, treatment, and educational wraparound services as an alternative to out-of-home placement for children with behavioral health problems and their families.
- The team is comprised of a clinician, case manager, and medical staff.

Prevention & Early Intervention*CHS Putnam County Wellness Center (Intercepts 0 & 5)*

- The Wellness Center is a community hub created in collaboration between Children's Home Society of Florida (CHS), LSF Health Systems, and *UF Health St. Johns*.
- The Wellness Center provides mental health and substance use services for adults and children as well as promotes referrals to community partners for services.
- Services include individual and family therapy, professional clothing closet, food pantry, telehealth, insurance assistance, support and guidance for pregnant women through Healthy Start, and more.

- The Wellness Center is open for walk-ins Tuesday-Thursday from 9 a.m. to 4 p.m. and available by phone 24/7 at 386-481-3471 or email at putnamwellnesscenter@chsfl.org.

Interface Youth Program operated by CDS Family and Behavioral Health Services (Intercepts 0 & 5)

- Interface is a CINS/FINS short-term voluntary residential program for youth ages 10-17.
- The shelter can serve up to 12 youth (6 female beds, 6 male beds).
 - At the time of the mapping, Interface was not at capacity.
- They receive referrals from truancy court and DCF.
- The average length of stay is 35 days.

St. Augustine Youth Services (SAYS) (Intercepts 0 & 5)

- The COACHES Program serves ages 6-21 within St. Johns, Putnam, and Flagler Counties.
 - COACHES assist with support and guidance for youths and families to improve their well-being with behavioral health issues and difficulties with accessing mental health services. As a part of the program, they will create a 6-to-9-month collaborative care plan. Staff is comprised of behavioral health case managers, therapists, peer and family advocates. Staff utilizes Wraparound Services and Trauma Focused Cognitive Behavioral Therapy (TFCBT).

Youth and Family Tree operated by SMA Healthcare

- The Youth and Family Tree Program provides prevention/education as well as counseling in the community for ages 16-25 and their families. This is for co-occurring MH/SU treatment.

A Helping Hand

- A Helping Hand is a nonprofit dedicated to providing mental health services to children and families throughout Florida with an emphasis on natural supports using strengths-based services and trauma-focused treatment.

Education

Putnam County School District Program- Alongside

- Alongside is an app that provides social-emotional learning and self-help wellness tools administered through a school's counseling team with modules such as journaling, breathing exercises, and an AI-powered chatbot.
- Alongside was piloted at It was piloted at Q.I. Roberts during the 2022-2023 school year. This year, there are three high schools using it: Q.I. Roberts, Palatka Jr./Sr. High School, and Interlachen Jr./Sr. High School.

SEDNET Project

- According to the Florida Department of Education, SEDNET is a network of 19 regional projects that are comprised of the major child serving agencies, community-based service providers, students, and their families. Section 1006.04, F.S., defines the statutory requirements and purpose of SEDNET. Local school districts serve as fiscal agents for each local regional project. Within this framework, SEDNET focuses on developing interagency collaboration and sustaining partnerships among professionals and families in the education, mental health, substance abuse, child welfare, and juvenile justice systems serving children and youth with and at-risk of an emotional/behavioral disorder (E/BD). Florida's statewide network of SEDNET projects serve as a collaborative resource for school districts, agencies, and families working to promote positive educational and community-based outcomes for children with E/BD.

Be Resilient and Voice Emotions (BRAVE) Program operated by UF Health St. Johns

- The BRAVE Program encourages youth to be open in receiving health and supports access to behavioral health services through care navigation and technology through school-based referrals.
 - The program provides family and youth counseling, virtual if possible/needed. Youth may also engage in counseling while they are at school (virtually).
- BRAVE serves school-age youth attending school in Circuit 7 and has been serving Putnam County for three years.
 - Y1: 55 referrals; Y2- 70 referrals; Y3 15 referrals (current)
 - 86% engagement rate, goal is 90% engagement rate

Community Supports*Patients Not Prisoners (Intercepts 0 & 5)*

- Patients Not Prisoners is a nonprofit organization that provides advocacy, education, and support for first responders and families that provide support to individuals with mental illness.
- Patients Not Prisoners represents the community and those that we seek to serve in the planning and implementation of Mental Health Courts.
- They are partnered with Better Help to provide therapy vouchers at no cost.

Community Coalition Alliance (CCA)

- The CCA works on collaborating with community coalitions around the State of Florida. The focus is to provide direct efforts on individual neighborhoods and communities while committed to sharing resources, best-practices, training, and mentoring.

Goodwill North Florida (Intercepts 0 & 5)

- Goodwill is a second chance employer that offers vocational, educational, and employment opportunities.
- Take Stock in Children program serves low-income youth in 7th-9th grade to provides in-school support through a college success coach to earn a vocational or educational scholarship when they graduate.

Strengths

- Student led mental health awareness event convened September 30, 2023.
- The BRAVE program is an asset to Putnam County youth. However, it may be beneficial to explore pathways to earlier identification/referrals of youth in need.
- A recovery school model has been discussed for Putnam County as an alternative school setting for youth in need of additional supports.

Opportunities for Improvement

- There are barriers to staffing within Putnam County and many youth services are out-of-county.
- There are barriers to engaging youth in mental health services due to parent permissions.
- Youth-led support group is convening in Putnam County. Explore evidence-based models for youth peer-to-peer support.

Intercept 1—Law Enforcement & Emergency Services

Emergency Services and 911

911 operated by PCSO

- Dispatchers have limited mental health training and will connect with law enforcement or MRT depending on availability.

Law Enforcement

Putnam County Sheriff's Office (PCSO)

Crisis Intervention Teams (CIT) Training

- Mental Health First Aid (MHFA) is provided to most of the PCSO employees upon hire and 40-hour CIT training.
- At the time of the mapping, St. Johns River State College hosts CIT trainings using salary incentives to encourage participation.
- MHFA training is provided by SMA Healthcare.
- The HEROS program support Narcan distribution among deputies.

Municipal Law Enforcement

- Palatka Police Department
- Crescent City Police Department
- Welaka Police Department
- Interlachen Police Department

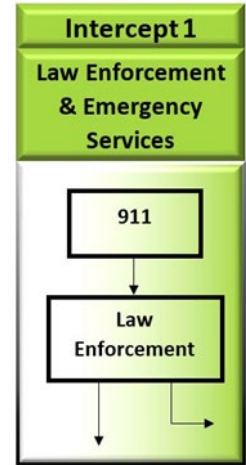


Table 6.

Summary of Putnam Sheriff's Office MH Calls & CIT Training

PCSO	06/2022-12/2022
LEO trained in specialized response (e.g. CIT), percent of sworn (%)	53%
# MH Calls handled by trained LE	60
MH crisis calls handled by trained LEO, percent (%)	50%

Crisis & Detoxification Services

Baker Act/Marchman 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.).
 - Law enforcement may provide initial transport to CTTU or meet CTTU vehicle to pick up an individual requiring transport to the nearest Baker Act receiving facility.
 - Individuals will be placed in restraints upon transport.

Crisis Triage and Treatment Unit (CTTU) operated by SMA Healthcare

- The SMA CTTU provides transport for all involuntary examinations between the hours of 8 a.m. to 12 p.m. Outside of these hours, law enforcement provides transport.
- The goal is for LEO to hand off within 15 minutes.
- SMA collaborates with law enforcement agencies to provide support and transportation for individuals in crisis and is funded by the CJMHSR Reinvestment Grant Program.

SMA Healthcare's Residential Adolescent Program (RAP)

- RAP is an residential substance use treatment program that serves ages 13-17. The program provides services including therapy, peer support, experiential learning theory, reality therapy, education, and behavior modification support.
- The average length of time in the program is 4-6 months.

Table 7.***Involuntary Baker Act Examinations by Receiving Facility***

Receiving Facilities	Involuntary Exams in FY 2021-2022 (% County Total)
Flagler Hospital	31.53%
Halifax Psychiatric Center – North	16.06%
UF Health Shands Psychiatric Hospital	11.85%
Meridian Behavioral Healthcare – Gainesville	9.64%
SMA Healthcare- Chet Bell Crisis Center	6.43%

(Baker Act Reporting Center FY 2021-2022 Annual Report, 2023)

Youth Baker Act receiving facilities:

- Halifax Child and Adolescent Behavioral Services
 - Halifax provides psychiatric services for children and adolescents (ages 2-17) with emotional and behavioral problems.
- SMA Healthcare Marion County
- Meridian Behavioral Healthcare

Youth Marchman Act receiving facilities:

- Juvenile Addictions Receiving Facility operated by Aspire (Orlando, FL)

Prearrest Diversion / Civil Citation

In FY22-23, 85% of first-time youth offenders were issued an alternative to arrest/civil citation (Florida Department of Juvenile Justice, 2023). The Civil Citation program is facilitated by the Putnam County Sheriff's Juvenile Crime Prevention Office. Youth who committed first-time misdemeanors are eligible for a civil citation. Youth and family will sign agreement and youth will participate in programming and then their charges will not be recorded. If they do not complete programming, PCSO will file with State Attorney's Office. Programs may include SWEAT, CFLC Creating Family Connections, JDAP, or Drug Awareness.

Table 8.
*Putnam County Civil Citation Data**

Month	Youth CC Eligible	Issued CC (count / %)
July 2022	1	0
August 2022	3	3
September 2022	13	12
October 2022	15	15
November 2022	6	6
December 2022	5	4
January 2023	15	12
February 2023	6	6
March 2023	9	7
April 2023	5	4
May 2023	7	6
June 2023	3	0
Total	88	75 (85%)

*(Retrieved from Florida Department of Juvenile Justice)

Strengths

- Putnam County has high civil citation utilization rates.
- DJJ has formed advisory board to engage communities.
- Explore creative funding opportunities available due to designation as rural area such as HRSA and STAR to incentivize behavioral health workers to the location.

Opportunities for Improvement

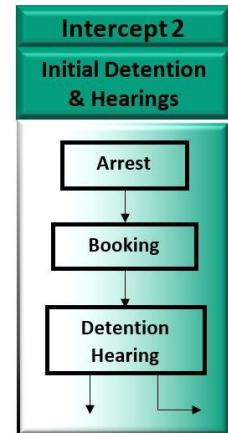
- Explore opportunities for additional diversion programming for juveniles such as Teen Court model.
- There is not an in-county receiving facility for juveniles under a Baker Act or Marchman Act Order. This acts as a major barrier when transiting home because SMA/local providers cannot provide transport back to county. Youth must be picked up by parent/guardian.
- There is a very limited number of options available for substance use treatment for juvenile under a Marchman Act order.

Intercept 2—Initial Juvenile Detention, Screening & Hearings

Arrest and Booking

Arrest/Taken into Custody

- When a youth is arrested, they are transported to the Putnam County Jail and will wait for DJJ to call and perform the DRAI screening over the phone.
 - After screening, the youth is released or placed on hold in a separate booking area within jail and waits for transport from DJJ. DRAI Assessment score of 7 points or more will require a court hearing held the next day. However, 7-12 points will result in supervised released and 13 or more points requires secure detention.
 - If a youth scores 13 or higher, DJJ will then transport to Volusia County Detention Center in restraints.
- The average time from arrest to screening/transport to secure detention is 4-6 hours. At the time of the mapping, there was a very low number of youth on average transported to secure detention (2 youth/week).
- If offense happens at school, then law enforcement will document.



Detention Hearing

- The detention hearing occurs within 24 hours of arrest and is convened in person at the Volusia County Courthouse (for all Circuit 7 youth).
 - If youth is on supervised release, the parent/guardian will bring youth to detention hearing.
 - If scored for secure detention on the DRAI, youth will be transported by detention center.

Arraignment Hearing

- Once a petition is filed, the next step is an arraignment hearing. If youth does not appear at the arraignment, then the court will issue a pick-up order (PUO). At arraignment, youth plead guilty or not guilty to the charges.
 - If the youth pleads guilty then the case is set for a disposition hearing.
 - If youth pleads not guilty then the case is scheduled for an adjudicatory hearing.
- Juvenile court adjudicatory hearings will have a judge review the case. If youth is found not guilty, the case ends. If the youth is found guilty, the court may proceed with disposition or set the case off for disposition and order DJJ to prepare a Predisposition Report (PDR). The PDR is generated by DJJ based on a multidisciplinary assessment and a treatment plan is established.
- If the youth is committed to DJJ by the court the youth can then attend programs. Programs can be residential or non-residential. Non-residential programs allow youths to reside at home and attend a program during the day. Residential programs require the youth to live away from home for a period of time. The length of stay for all of the programs depends mostly on the youth needs and participation in the program.

Diversion Programs

BAYS Programs

Bays is a non-residential provider for DJJ that works with families and individuals and utilizes service delivery models.

Juvenile Diversion Alternative Program (JDAP)

- JDAP a pre or post arrest diversion program that provides services to the youth and family referred by SAO or DJJ with eligible misdemeanor and/or violent first-degree misdemeanors, and felonies. The average length of time in the program is 2-4 months.
- Services include initial assessments, monitoring of interventions, psychoeducational services, vocational and educational support, monitoring and referrals for MH and/or SUD services.

Supportive Trusting Relationships with Inclusion, Vision, and Empathy (STRIVE) Program

- STRIVE partners with Community Partnership for Children (CPC) for referrals of children in need who reside in Volusia, Putnam, and Flagler Counties. The average length of stay in the program is 90-120 days.
- To be eligible, parental/guardian must consent, and youth must be involved in or at risk of involvement with JJ and/or Child Welfare systems and engaged in disruptive behaviors.
- Services included are Enhanced Family Stabilization, a family support partner, prevention and safety planning, parenting classes, behavior and mood management, crisis management, employability skills, community and family support, and transition planning and linkages to services following conclusion of STRIVE.

Strengths

- Explore pathways to leverage BAYS for additional diversion programming.

Opportunities for Improvement

- The community expressed the challenge of engaging parents and families in youth treatment services.

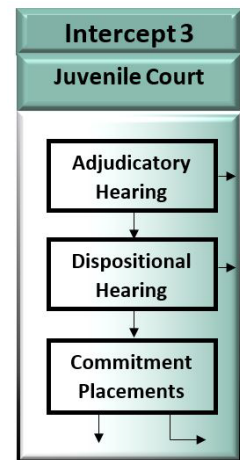
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Intercept 3—Detention & Courts

Juvenile Detention Center

Volusia Regional Detention Center operated by DJJ

- Youth requiring medical clearance for injury or mental health needs will not be accepted into secure detention and are transported to the nearest hospital and supervised by law enforcement officer the duration of their stay.
- All youth referred to DJJ shall receive an initial mental health and substance use screening. The initial mental health and substance use screening is accomplished through administration of the Massachusetts Youth Screening Instrument-2 (MAYSI-2)
 - If the need for further assessment is indicated by the MAYSI-2, the youth shall be referred for a comprehensive assessment.
 - If the youth is to be released, the parent(s)/guardian(s) shall be informed of the results of the MAYSI-2 and shall be given information as to the location of the comprehensive assessment provider, the appointment time, if arranged by the JPO, and the importance of delivering the youth for the follow-up appointment.
 - When the MAYSI-2 results or other information obtained indicates possible suicide risk, the youth shall be referred for an assessment of suicide risk to be conducted by Halifax within twenty-four (24) hours or immediately if the youth is in crisis. Halifax must provide medical clearance for the youth to return to the detention center.
- JPO screeners participate in in-service trainings annually.
- Services include education, mental health, substance use, and primary healthcare.
- There is a mental health clinician and nurse on staff at the detention center. A nurse (LPN/RN) is present 24/7. A doctor is on-call and available to come in to prescribe medications or conduct telehealth appointments on occasion. A psychiatrist is at the detention center once a week and the facility has on-site mental health staff.
- DJJ transports youth for medical appointments with external providers.
- Within 24 hours of admission, parents may bring prescriptions to the detention center for their child.



Problem-Solving Courts

Truancy Court

- If a school determines a student has accumulated at least 5 unexcused absences, within a calendar month or 10 absences within a 90-day calendar period, the school may file a truancy petition (F.S. 984.151).
- CDS receives referrals to provide services for youth engaged in Truancy Court.

Dispositional Options

Dispositional options include Probation – Supervision, Commitment, and Probation – Transition and Reentry.

Strengths

- CAT Team is permitted to visit youth in the detention center.

Opportunities for Improvement

- There are not any mental health-specific services provided to youth while in secure detention.
- Explore opportunities for other providers to be allowed to visit clients while in detention.

Intercept 4—Reentry

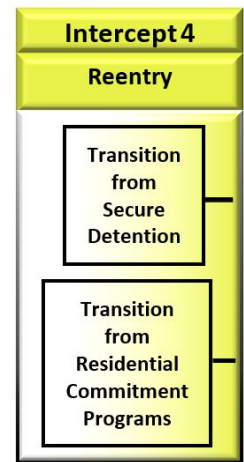
Reentry/Discharge Planning

Release from Secure Detention

- Upon release from secure detention, there is not a formal discharge process. Schools are informed when a youth enrolled/previously enrolled in their school district was released.

Release from DJJ Residential Commitment Programs

- The community reentry team meeting occurs on average 7-20 days from scheduled release. Case managers identify success plan and reviews time and dates for release. Case managers connect mental health services and can initiate wraparound process. Child welfare will collaborate after the youth is released. Part of the exit meeting, medications are provided with refills.
- The community reentry team (CRT) is comprised of DJJ staff, commitment program reentry staff, family members, community mental health providers, courts, juvenile advocacy lawyers, and others involved in a youth's care upon reentry.
 - If a youth is on psychotropic medications, the plan of care will be discussed during the CRT meeting and youth will leave with enough medications to support them until their first appointment in the community.



Strengths

- Community Reentry Team (CRT) is utilized to help assist the youth and families with reentry.
- DJJ Advisory Board has been created to help address detention issues.

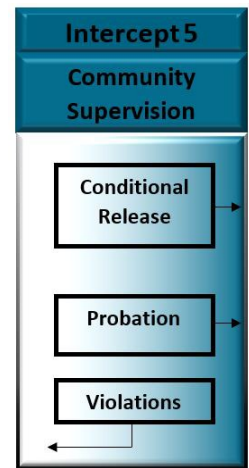
Opportunities for Improvement

- There is a need for stigma reduction initiatives for families and youth in the system and experiencing MH and/or SUD issues.
- System navigators would be beneficial to assist with reentry process.
- The community expressed a need to have an alternate housing option or independent living for transition aged youths ages 18-21.

Intercept 5—Community Supervision

Community Supervision/Conditional Release

Probation is a supervision program created by law, which is ordered by the court in cases involving a youth who is found to have committed a delinquent act. Probation is a legal status in which the freedom of the youth is limited, and the youth's activities are restricted in lieu of commitment to the custody of the Department of Juvenile Justice (DJJ). For youth with mental health and substance use needs, DJJ probation refers for services through community-based and contract providers. The JPO shall refer the youth and parent(s)/guardian(s) to the appropriate service(s) as identified through the Community Assessment Tool (CAT) which administered 90 days prior to release. The JPO provides support, referrals, and follow-up within 24 hours of release. The assessment of youth is not a one-time event, but an ongoing process. Therefore, the JPO shall update the youth's risk and needs assessment to ensure that CAT results are reflective of the youth's status, including changes in behavior and progress.



Juvenile Probation

- There are 4 JPOs serving Putnam County youth.
- JPOs receive Mental Health First Aid training, Motivational Interviewing training, and a human trafficking training. There are specialized caseloads for sexually violent offenders and gun violence.

Crisis Services

Mobile Response Team (MRT) operated by Children's Home Society (Intercepts 0 & 5)

- Refer to description in Intercept 0.

Putnam County Wellness Center provide by CHS (Intercepts 0 & 5)

- Refer to description in Intercept 0.

Community Supports

Aza Health Federally Qualified Health Center (FQHC)

- Aza Health is the designated FQHC in Putnam County and provides mental healthcare, primary healthcare, dental healthcare and supports an on-site pharmacy.

Police Athletic League Programs

- The City of Palatka and Putnam County offer PAL recreational programs for youth across the county such as basketball, cheerleading, and mentoring.

Patients not Prisoners (Intercepts 0 &5)

- Refer to description in Intercept 0.

Housing

Palatka Housing Authority

- At the time of the mapping, Meridian recently received a Treatment of Individuals Experiencing Homelessness and looks to partner with Palatka Housing Authority that has a waitlist of over 900 Putnam County citizens in need of housing.

Employment and Vocation

CareerSource

- CareerSource supports a summer internship program for teens 16+.

Goodwill (Intercepts 0 & 5)

- Refer to description in Intercept 0.

Strengths

- Recreational activities available through Police Athletic League at both county and city level.

Opportunities for Improvement

- Explore supported employment opportunities for teens and transition age youth through local second chance employers.
- Peers and family navigators may be leveraged to assist with engagement and navigation of behavioral health and juvenile justice system.

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Putnam County Juvenile Priorities for Change

At the end of the Juvenile mapping on day two, priority areas are determined through a voting process. Workshop participants are asked to identify a set of priorities followed by a vote, where each participant has three votes. Participants are not allowed to vote for the same priority more than once. The voting took place on September 20, 2023. As a result of discussions earlier in the day, 7 goals/priorities emerged. The top 4 of the 7 goals are addressed in the action plan (Table 9), as they were voted most important by the group. The entire list of the seven goals/priorities is provided below to guide future planning efforts. The top 4 priorities / goals are identified in bold text.

Table 9.

Priority Voting Survey Results

Priority Area / Goal	Votes
Family Engagement	14
Reentry Planning (re: detention/housing needs)	13
Integrated Multipurpose Facility	13
Handle with Care Model	11
Coordinated student led programming (e.g. Youth MOVE)	10
Stigma Reduction	2
Workforce Capacity	0

The juvenile action plan is presented on page 37.

Putnam County Action Plan

Action Planning Process



Figure 2. Handle with Care Action Planning Group

For action planning, stakeholders were split into breakout groups to create tasks, objectives, performance measures/action steps for each priority area identified. Groups were self-selected to ensure wide representation of organizations and communities within each priority’s goals/objectives (Table 10). Each breakout group shared their work on the assigned goal/priority area with the larger group and participated in an open discussion. The stakeholders were enthusiastic and engaged participants throughout the development of a strategic action plan. The Putnam County adult and juvenile action plans are presented on the following pages.

It is important to acknowledge that while the action plans were focused on specific target populations some of the priorities are applicable to both populations. Specifically, community awareness of resources was emphatically reiterated as a concern throughout both days of mapping. While activities will need to be tailored to specific target population needs, this priority area as well as reentry planning are important to consider community wide.



Figure 3. Action Plan Presentations

Table 10.

Summary of Action Planning Group Participants

Group	Participants
Adult Priorities	
Community Awareness	Wendy Hansford, Randy Hayes, Mark Lewis, Alan Paulin, Lauren Pilkinton, Paul Stevens
Reentry Resource Center Planning	The Honorable Judge Janesk, Nancy Russo, Scott Surrency, Lisa Taliaferro, Kayla Walton, Jennifer Whipple
Training (re: target population)	Jacqueline Cox, Courtney DeSouza, Sandra Jackson, Amber Moskal
Juvenile Priorities	
Family Engagement	Jacqueline Cox, DeShaun Deering, Christy Gillis, Dusty Pye, Lakesha Session
Reentry Planning (re: detention/housing needs)	Diana Drew, Samantha Earls, Wendy Hansford, Meghan Riley-Reynolds
Integrated Multipurpose Facility	Terri Crawford, Alex Culbreth, Sandra Jackson, Erica Machnic, Shirley Olson, Steve Rose, Nancy Russo, Tara Thompson
Handle with Care Model	Julie Barrow, Lindsay Gamboa-Thompson, The Honorable Judge Janesk, Jennifer Young

Putnam County Adult Action Plan

Goal 1: Community Awareness (General Population, Caregivers, School Staff, Providers, Hospital (d/c planners), Clerk of Courts, LEO/In Field)

Task		Performance Measure	Lead Person or Organization	Projected Completion Date
Objective 1.1: Perform outreach to local organizations.				
1.1a	Organic Grass Roots (Coffee shops, salons, spa, barbershops, etc.).	<ul style="list-style-type: none"> Track contacts Track presentations 	<ul style="list-style-type: none"> CCA/Putnam Co Prevention Coalition 	Ongoing 9/28/23
1.1b	Faith Based (Systematic/targeted) to each church/syn/temple/mosque.	<ul style="list-style-type: none"> Track contacts Track presentations 	<ul style="list-style-type: none"> CCA/Putnam Co Prevention Coalition /Behavioral Health Forum 	Ongoing 9/28/23
1.1c	Support/Invite NAMI to establish chapter.	<ul style="list-style-type: none"> Track calls/emails during outreach 	<ul style="list-style-type: none"> CCA/Putnam Co Prevention Coalition /Behavioral Health Forum 	Ongoing 9/28/23
Objective 1.2: Increase relationships with local entities (schools, medical providers, etc.).				
1.2a	Establish/invite marketing and development staff.	<ul style="list-style-type: none"> Identify current development staff in existing involved agencies New marketing/development agency staff involvement 	<ul style="list-style-type: none"> CCA/Putnam Co Prevention Coalition /Behavioral Health Forum 	6 months
1.2b	Present to boards/school boards and bring meetings to their spaces.	<ul style="list-style-type: none"> # of Baseline of current contacts # of new contacts # after 1, 2 years # of meetings 	<ul style="list-style-type: none"> CCA/Putnam Co Prevention Coalition /Behavioral Health Forum 	Ongoing 9/28/23

Task		Performance Measure	Lead Person or Organization	Projected Completion Date
Objective 1.3: Explore marketing strategies (getting the word out).				
1.3a	QR Codes/Resource cards.	<ul style="list-style-type: none"> Distribute broadly at events and schools/PTO 	<ul style="list-style-type: none"> United Way CHS/SMA/CMH 	1/2024
1.3b	Increase activity on social media	<ul style="list-style-type: none"> Explore need to create dedicated page Enhance current sites/pages 	<ul style="list-style-type: none"> Behavioral Health Forum Member/CCA 	3/2024
1.3c	Traditional Marketing.	<ul style="list-style-type: none"> Billboards/radio Tabling/festivals/events 	<ul style="list-style-type: none"> United Way/CHS 	9/2024
Objective 1.4: Coordinate existing leadership groups.				
1.4a	Reach of to all Community Stakeholders to identify what leadership meetings are held throughout the community.	<ul style="list-style-type: none"> Compile list and purpose/frequency/time of meetings. Distribute list to Forum Members 	<ul style="list-style-type: none"> CCA/Putnam Co Prevention Coalition /Behavioral Health Forum 	1/2024
1.4b	Identify duplicative efforts in meetings and create a plan to combine.	<ul style="list-style-type: none"> Hold a combined meeting for all Leadership Meeting heads to discuss a plan to reduce unnecessary meetings Send out updated list of meetings to Forum Members Ensure all integral partners are in attendance at the right meetings 	<ul style="list-style-type: none"> Community Meeting Leaders/ Behavioral Health Forum 	9/2024

Goal 2: Reentry Resource Center

Task		Performance Measure	Lead Person or Organization	Projected Completion Date
Objective 2.1: Decrease recidivism of people released from jail/prison.				
2.1a	Develop a checklist of possible barriers to have basic needs met.	<ul style="list-style-type: none"> Barrier list 	<ul style="list-style-type: none"> BHF Subcommittee 	6/30/24
2.1b	Develop reentry plans that can be individualized to meet specific needs.	<ul style="list-style-type: none"> Reentry plans 	<ul style="list-style-type: none"> BHF Subcommittee 	6/30/24
2.1c	Develop mindset that reentry planning begins at arrest.	<ul style="list-style-type: none"> Research reentry planning best practices 	<ul style="list-style-type: none"> BHF Subcommittee 	11/2/23
Objective 2.2: Develop policies and protocols for resource center.				
2.2a	Site visit to other jails to see what works.	<ul style="list-style-type: none"> Conduct site visits 	<ul style="list-style-type: none"> BHF Subcommittee 	12/15/23
2.2b	Seek the right applicant and provide appropriate training.	<ul style="list-style-type: none"> Track applications Training options 	<ul style="list-style-type: none"> BHF Subcommittee 	3/30/24
2.2c	Shifting culture by providing training with person centered reentry.	<ul style="list-style-type: none"> # of Trainings 	<ul style="list-style-type: none"> BHF Subcommittee 	3/30/24
Objective 2.3: Secure ongoing funding/partnerships for program needs.				
2.3a	Research/apply for applicable grants/funding opportunities.	<ul style="list-style-type: none"> Applications for grants 	<ul style="list-style-type: none"> BHF Subcommittee 	Ongoing 9/28/23
2.3b	Develop Partnerships with community programs/people/providers to meet specific needs of the population.	<ul style="list-style-type: none"> Confirm partnerships 	<ul style="list-style-type: none"> BHF Subcommittee 	Ongoing 9/28/23
2.3c	Fundraising events/brainstorm new ideas.	<ul style="list-style-type: none"> Funds collected from events 	<ul style="list-style-type: none"> BHF Subcommittee 	Ongoing 9/28/23

Goal 3: Training (re: target population) such as CIT/HFA/Trauma Informed Care

Task		Performance Measure	Lead Person or Organization	Projected Completion Date
Objective 3.1: Identify target populations.				
3.1a	Adults with mental health disorders.	<ul style="list-style-type: none"> Statistics from providers 	<ul style="list-style-type: none"> SMA 	12/1/23
3.1b	Adults with substance use disorders.	<ul style="list-style-type: none"> Statistics from providers 	<ul style="list-style-type: none"> SMA/Meridian 	12/1/23
Objective 3.2: List available trainings and make accessible.				
3.2a	Each agency lists trainings they offer.	<ul style="list-style-type: none"> Master list of trainings is created, and which agency can do it 	<ul style="list-style-type: none"> PC BH Consortium Forum 	3/1/24
3.2b	Schedule and provide trainings to various community members.	<ul style="list-style-type: none"> Post a monthly schedule in local community area 	<ul style="list-style-type: none"> PC BH Consortium Forum 	6/1/24
Objective 3.3: Ensure various professionals receive trainings.				
3.3a	List agencies and professionals who should receive training (continuous).	<ul style="list-style-type: none"> Agencies listed and ensuring participation 	<ul style="list-style-type: none"> PC BH Consortium Forum 	8/1/24
3.3b	Specify types of training for each target population.	<ul style="list-style-type: none"> List of training descriptions and these available 	<ul style="list-style-type: none"> PC BH Consortium Forum 	10/1/24

Putnam County Juvenile Action Plan

Goal 1: Family Engagement

Task		Performance Measure	Lead Person or Organization	Projected Completion Date
Objective 1.1: Early intervention peer groups (include breaking stigma).				
1.1a	Meet with School Advisory Council, District Advisory Council, and Student Advisory Council to find out what is already being done to reduce stigma and get buy in on future needs	<ul style="list-style-type: none"> # of invested council members and gaining understanding 	<ul style="list-style-type: none"> School District, LSF, CHS 	1/2024
1.1b	Peer groups for middle/high school teens and another one for parents	<ul style="list-style-type: none"> # of teens and parents attended 	<ul style="list-style-type: none"> CHS Wellness Center 	6/2024
1.1c	Reentry groups	<ul style="list-style-type: none"> # of meetings with reentry individuals 	<ul style="list-style-type: none"> Sherriff's Office Reentry Center 	12/2024
Objective 1.2: Plan a Putnam Town Hall event for Mental Health Awareness Month.				
1.2a	Find a location available in May 2024	<ul style="list-style-type: none"> # of available options and accommodations 	<ul style="list-style-type: none"> Forum Members 	1/2024
1.2b	Market event to the community-share with providers, flyers, emails, radio spots	<ul style="list-style-type: none"> # of families that register and attend 	<ul style="list-style-type: none"> Forum Members 	5/2024
1.2c	Send out post-event survey	<ul style="list-style-type: none"> # of families that submit feedback 	<ul style="list-style-type: none"> Forum Members 	6/2024
Objective 1.3: Convene continued peer support groups (dependent on support).				
1.3a	Student Advisory Council to start a peer group	<ul style="list-style-type: none"> # of students that regularly attend 	<ul style="list-style-type: none"> School District 	Ongoing
1.3b	CHS Wellness Center to host peer groups for teens and adults	<ul style="list-style-type: none"> # of students and parents that regularly attend 	<ul style="list-style-type: none"> CHS Wellness Center 	Ongoing

Goal 2: Integrated Multipurpose Facility (MA, CSU, Respite)

Task		Performance Measure	Lead Person or Organization	Projected Completion Date
Objective 2.1: Research the viability of the program.				
2.1a	Research/gather data on population.	<ul style="list-style-type: none"> Data on population/facilities 	<ul style="list-style-type: none"> Flora Davis 	February 2024
2.1b	Tour multipurpose facilities (Lakeshore Crescent City and Gracepoint in Tampa).	<ul style="list-style-type: none"> Conduct site visits 	<ul style="list-style-type: none"> Sub-Committee Forum 	February 2024
2.1c	Identify budget/licensing/funding source.	<ul style="list-style-type: none"> Cost analysis Licensing research 	<ul style="list-style-type: none"> Sub-Committee Forum 	April 2024
Objective 2.2: Locate land/facility.				
2.2a	Implement media campaign.	<ul style="list-style-type: none"> Media data and tracking 	<ul style="list-style-type: none"> Forum members 	October 2024
2.2b	Advertise at community meetings (city and state owned).	<ul style="list-style-type: none"> List of community meetings to attend 	<ul style="list-style-type: none"> Forum members 	October 2024
2.2c	Research available property.	<ul style="list-style-type: none"> List of land/facilities 	<ul style="list-style-type: none"> Forum members 	May 2024
Objective 2.3: Legislative Budget Requirements (LBR/Capital and recurring)				
2.3a	Attend legislative sessions in Putnam and surrounding counties.	<ul style="list-style-type: none"> List of sessions and # attended 	<ul style="list-style-type: none"> SMA and PCSO 	2024

Goal 3: Reentry planning: target population ages <17 (re: detention, direct release/intake status)

Task		Performance Measure	Lead Person or Organization	Projected Completion Date
Objective 3.1: Involve key stakeholders in the process of reentry.				
3.1a	Identify the key stakeholders. Examples JPO, school staff, CHS, SMA, Meridian, Legal Guardians, school guidance counselors.	<ul style="list-style-type: none"> Comprehensive list of stakeholders is distributed 	<ul style="list-style-type: none"> Forum 	6 months
3.1b	Ensure participation of stakeholders in meetings.	<ul style="list-style-type: none"> Meeting attendance/agendas 	<ul style="list-style-type: none"> Forum 	6 months
Objective 3.2: Smooth transition/reintegration back into the community.				
3.2a	Online forum to communicate with Wellness Center.	<ul style="list-style-type: none"> Track # of forms/spreadsheet 	<ul style="list-style-type: none"> CHS 	1 year
3.2b	NAMI Resources.	<ul style="list-style-type: none"> NAMI presents at forum 	<ul style="list-style-type: none"> Forum 	6 months
3.2c	Research best practices.	<ul style="list-style-type: none"> APIC Model and other possibilities 	<ul style="list-style-type: none"> Forum 	6 months
Objective 3.3: Smooth transition/reintegration back into the community.				
3.3a	Utilize/identify protective factors including the use of mentors.	<ul style="list-style-type: none"> Comprehensive list of protective factors 	<ul style="list-style-type: none"> PCSD 	1 year
3.3b	Reintegration meeting at school level.	<ul style="list-style-type: none"> Documentation in online BIP, STAR platform, notes child study meeting form 	<ul style="list-style-type: none"> PCSD 	1 year
3.3c	Educate students on post-secondary opportunities.	<ul style="list-style-type: none"> Documentation in online BIP, STAR platform, notes child study meeting form 	<ul style="list-style-type: none"> PCSD 	1 year

Goal 4: Handle with Care Initiative

Task		Performance Measure	Lead Person or Organization	Projected Completion Date
Objective 4.1: Explore Handle with Care models in neighboring community and collect data.				
4.1a	Go in person/call/email schools LE about the Handle with Care info.	<ul style="list-style-type: none"> Email received to HWC Manatee, Flagler HWC, PSO, PCS, MRT 	<ul style="list-style-type: none"> Julie Barrow 	9/21/23
4.1b	Convene meeting.	<ul style="list-style-type: none"> Date/forum set 	<ul style="list-style-type: none"> Julie Barrow 	1/1/24
4.1c	Review MOUs.	<ul style="list-style-type: none"> List of confirmed MOUs 	<ul style="list-style-type: none"> PCSD/PCSO 	2/1/24
Objective 4.2 Develop model for Putnam County.				
4.2a	Identify Gatekeepers.	<ul style="list-style-type: none"> School board, social services, Sheriff (JCPO) approval 	<ul style="list-style-type: none"> PCSD/PCSO 	1/15/24
4.2b	Identify Staff.	<ul style="list-style-type: none"> Staff from each party identified for implementation 	<ul style="list-style-type: none"> PCSD/PCSO 	1/15/24
4.2c	Train staff such as systems, communication, plan, staff expectations.	<ul style="list-style-type: none"> Trainings set 	<ul style="list-style-type: none"> Julie Barrow 	5/30/24
Objective 4.3: Conduct Putnam County pilot.				
4.3a	Pilot Program and gather data.	<ul style="list-style-type: none"> Pilot school roll out 	<ul style="list-style-type: none"> PCSD/PCSO 	8/2024
4.3b	Partner with HWC FL for TA	<ul style="list-style-type: none"> Set the TA meeting 	<ul style="list-style-type: none"> Julie Barrow 	7/2024

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.

- Engage community partners including NAMI, the Health Department, faith-based organizations, and RCO in future conversations and strategic planning efforts for the target population.

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 CJMHS TAC presents the following recommendations:

Overall Recommendations

1. Pursue localized awareness of resources through grass-roots outreach to Putnam County community members, students, and stakeholders.
 - a. Pursue stigma reduction initiatives that emphasize break down of NIMBYism (“not in my backyard”) barriers.
2. Explore opportunity to leverage peer specialists throughout continuum for supports in recovery, reentry, and reintegration into the community following behavioral health and/or justice system involvement.
 - a. This may also serve as a means to further priority area of family engagement for the youth population through parent partners.
3. Explore transportation alternatives/options for both populations.
 - a. Explore the feasibility of engaging highly utilized service providers meet at centralized placed at specific times monthly to be accessible.
 - b. Consider Uber Health and other innovative transportation options absent reliable public transportation infrastructure.
4. Identify creative recruitment and retention strategies to address behavioral health workforce shortage, such as promotion of HRSA NHSC Student Loan Forgiveness and Public Service Loan Forgiveness programs.
 - a. Consider shared staff models.
5. Identify opportunities to embed person-first approaches and services across the recovery-oriented system of care.
 - a. Promote concepts of recovery and hope throughout services.
6. Ensure use of evidence-based Supported Employment models to address employment and service needs of individuals with **both** behavioral health and criminal justice backgrounds.
7. Consider community-wide saturation of training regarding trauma, its risks and impacts and signs/symptoms and behaviors that may be trauma responses. Encourage a culture of trauma-informed care among both behavioral health and criminal justice populations.
 - a. Consider training a cohort of Putnam County professionals in SAMHSA Trauma-Informed Care curriculum (<https://www.samhsa.gov/gains-center/trauma-training-criminal-justice-professionals>),

Adult System Recommendations

1. Meeting the housing needs of the target population was a goal in the 2018 SIM Action Plan. Due to the nature of the housing market and limited availability of housing statewide, there has been little movement on this priority area. In this SIM workshop, it also arose as a potential priority area. Therefore, it is important to acknowledge that there remains a need for both short-term shelter housing and Permanent Supportive Housing for Putnam County residents with mental health, substance use and/or co-occurring disorders. This need should continue to be explored. It may be beneficial to develop a housing workgroup to ensure that this remains a priority despite barriers to creating/establishing housing options in this rural community.
2. Convene meeting with local providers and VA to discuss information sharing (HIPAA/42 CFR) for individuals booked into Putnam County Jail in a timely manner.
3. Consider identifying the top 10 high utilizers of Putnam County continuum to target resources and supports to these individuals and divert from justice involvement.
4. Engage Recovery Point Recovery Community Organization (RCO) in future meetings and conversations.
5. Review lessons learned from planning and development of Mental Health Court Programs in St. Johns County and Clay County.
6. Engage Duval County NAMI Chapter to explore feasibility and interest in developing localized supports in Palatka.
7. Increase collaboration of local hospitals in Behavioral Health Forum planning.
8. Explore involuntary outpatient treatment models such as Assisted Outpatient Treatment (AOT) for individuals who meet AOT clinical criteria.
9. Consider use of evidence-based screening tools at booking to ensure fidelity to best practice,

Juvenile System Recommendations

1. Examine pathways to earlier identification and engagement of youth in need of behavioral health services as a means of prevention from deeper involvement in the behavioral health and/or justice systems.
2. Coordinate with ongoing work of Community Coalition Alliance regarding youth-led support groups and review national best practice models for connecting youth and youth adults who have lived experience in behavioral health and justice systems such as Youth MOVE to determine the possibility of formalizing peer-led groups in Putnam County.
 - a. Conduct outreach to Florida-based Youth MOVE programs.
3. Continue efforts on planning for a local recovery school in the community. This recovery school may also serve a dual purpose for the population of youth who may not return to traditional school settings following justice involvement.
4. Increase involvement/leverage at the school level regarding mental health and substance use prevention initiatives.

The USF CJMHSA Technical Assistance Center is available to Putnam County stakeholders working to address the issues identified in the action plan and recommendations above.

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

Abby Shockley, Director, CJMHSA TAC, ashockley1@usf.edu

Katelind Melendez, Assistant Program Director, CJMHSA TAC, katelind@usf.edu

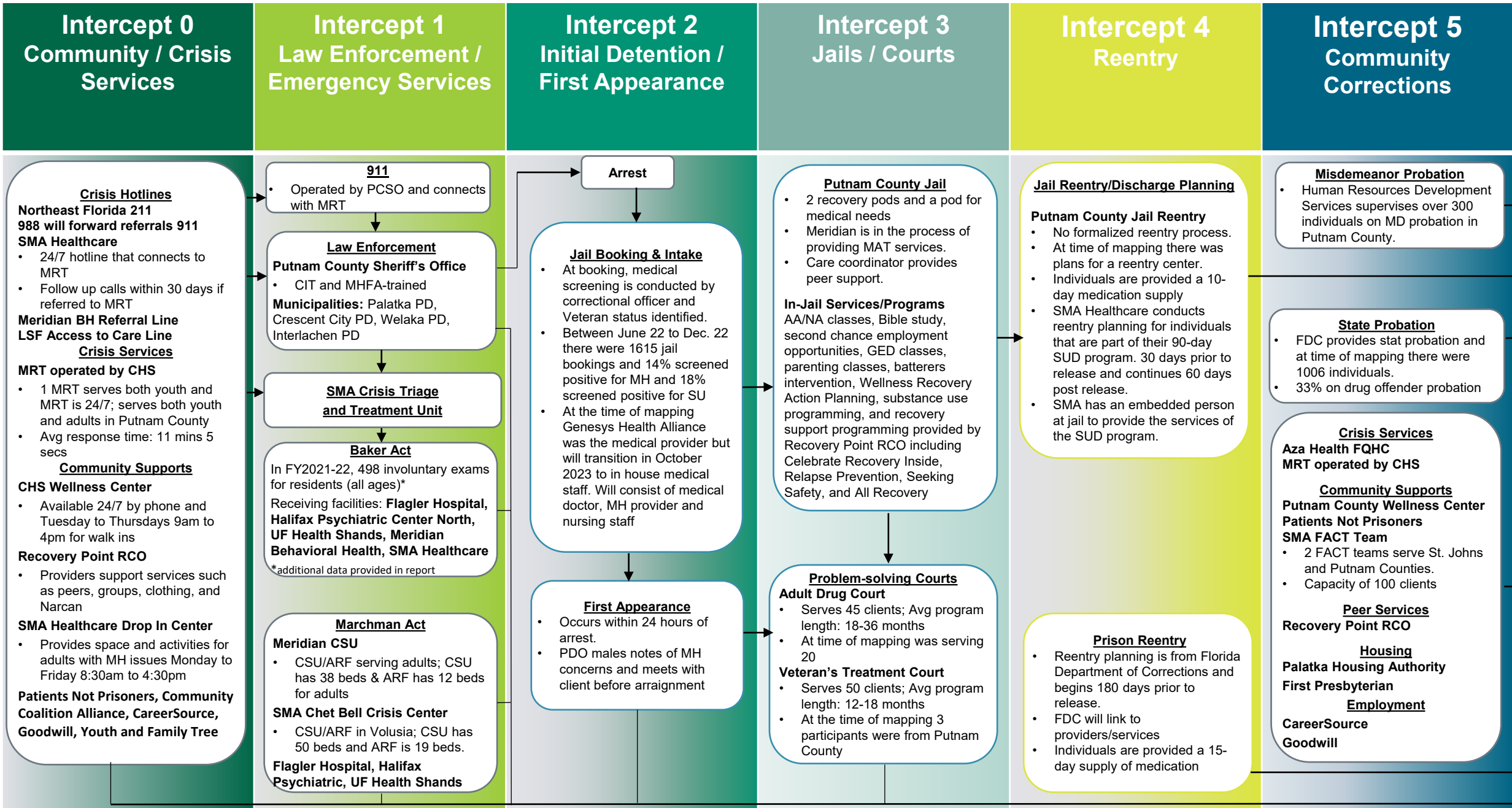
Beth Holland, Learning and Development Facilitator, CJMHSA TAC, holland75@usf.edu

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

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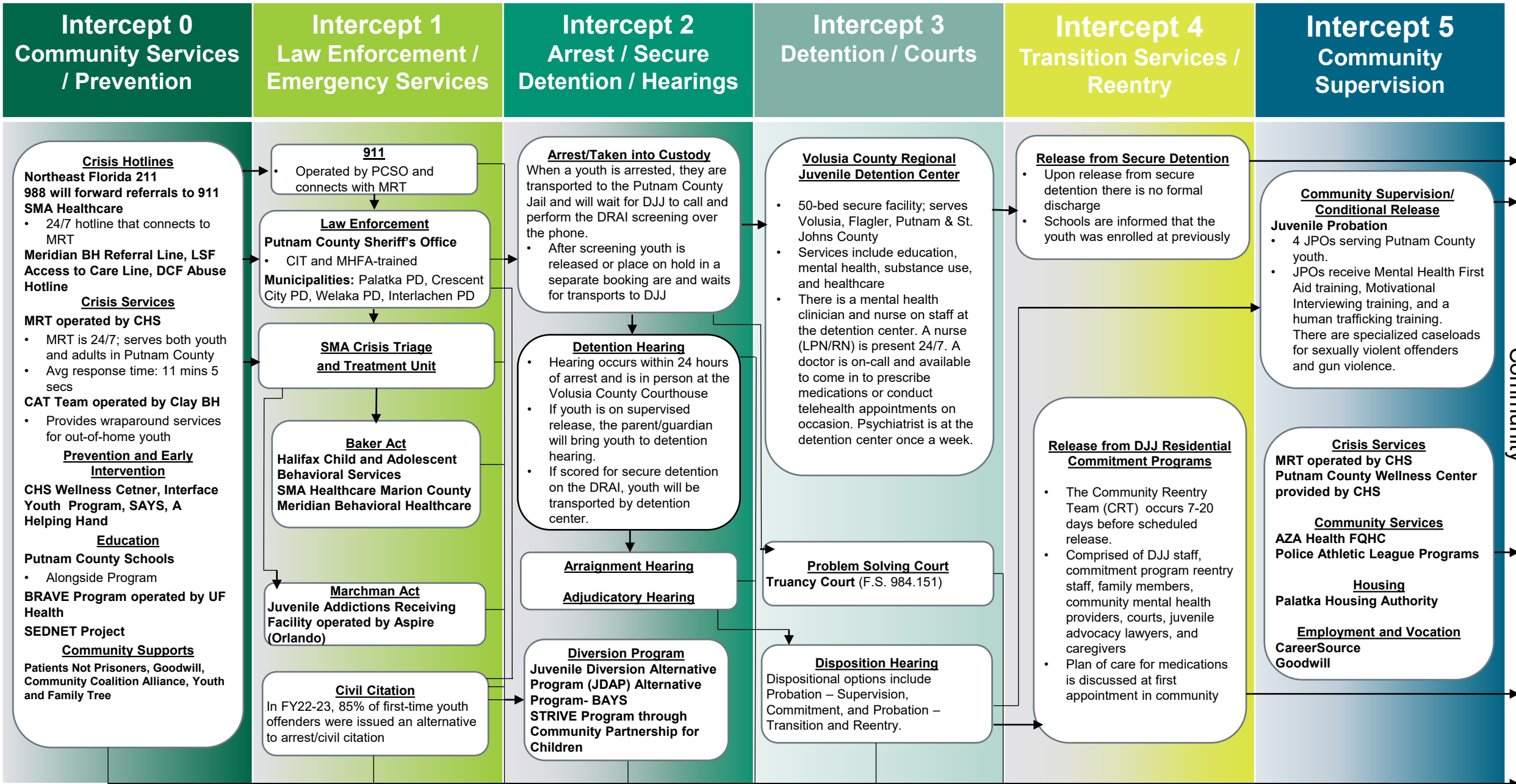
Adult Sequential Intercept Map: Putnam County, Florida

Community



Community

Juvenile Sequential Intercept Map: Putnam County, Florida



Appendix A: Participant List

Name	Organization	Email	Sept. 19 Adult SIM	Sept. 20 Juv. SIM
Alan Paulin	Meridian	alan_paulin@mbhci.org	✓	
Alex Culbreth	CDS Family & BH Services	alex_culbreth@cdfsfl.org		✓
Amber Moshal	Public Defender's Officer	moskal.amber@pd7.org	✓	
Abby Shockley	University of South Florida	ashockley1@usf.edu	✓	✓
Anthony Woods	Palatka Housing Authority	aewoods@palatkaha.org	✓	
Beth Holland	University of South Florida	holland75@usf.edu	✓	✓
Christy Gillis	Department of Children and Families	christina.gillis@myflfamilies.com	✓	✓
Courtney De Souza	Welaka Events Committee	courtneydesouza@gmail.com	✓	
Deshawn Derray	Department of Juvenile Justice	deshawn.derray@fldjj.gov		✓
Diane Drew	Putnam Schools	dadrew@my.putnamschools.org		✓
Dusty Pye	LSF Health Systems	dusty.pye@lsfnet.org	✓	✓
Erica Machnic	LSF Health Systems	erica.machnic@lsfnet.org	✓	✓
Eryka Marshall	University of South Florida	eryka@usf.edu	✓	✓
Isabelle Vincent Valeus	Veterans Justice	Isabelle.valeus@va.gov	✓	
Jacqueline Cox	CHS Wellness Center	jacqueline.cox@chsfl.org	✓	✓
Jennifer Whipple	Probation	jennifer.Whipple@fdc.myflorida.com	✓	

Name	Organization	Email	Sept. 19 Adult SIM	Sept. 20 Juv. SIM
Jennifer Young	SMA Healthcare	jyoung@smahealthcare.org		✓
Joshua Lewis	Putnam County Sheriff's Office	jllewis@putnamcountysheriff.org		✓
Julie Barrow	SEDNET	jbarrow@volusia.k12.		✓
Kayla Walton	LSF Health System	kayla.walton@lsfnet.org	✓	
Katelind Melendez	University of South Florida	katelind@usf.edu	✓	✓
Lauren Pilkinton	LSF Health Systems	lauren.pilkinton@lsfnet.org	✓	
Lakesha Session	Palatka Housing Authority	lsession@palatkaha.org	✓	✓
Lindsay Gamboa-Thompson	Flagler Health/UF Health St. Johns	lindsay.Thompson@FlaglerHealth.org		✓
Lisa Taliaferro	Patients Not Prisoners	patientsnotprisonersfl@gmail.com	✓	
Major Rose	Putnam County Sheriff's Office	srose@putnamsheriff.org		✓
Major Scott Surrency	Putnam County Sheriff's Office	ssurrency@putnamsheriff.org	✓	
Mark Lewis	State Attorney's Office	lewism@sao7.org	✓	
Meghan Riley-Reynolds	LSF Health Systems	meghan.rileyreynolds@lsfnet.org		✓
Nancy Russo	SMA Healthcare	nrusso@smahealthcare.org	✓	✓
Paul Stevens	Florida Dept of Corrections	paul.stevens@fdc.myflorida.com	✓	
R. L. Hayes	Putnam County Sheriff's Office	rhayes@putnamsheriff.org	✓	
Samantha Earls	Public Defender's Office	earls.samantha@pd7.org		✓

Name	Organization	Email	Sept. 19 Adult SIM	Sept. 20 Juv. SIM
Sandra Jackson	SMA Healthcare	sjackson@smahealthcare.org	✓	✓
Shirley Olson	Circuit 7 Courts	solson@circuit7.org	✓	✓
Steve Rose	Putnam County Sheriff's Office	srose@putnamsheriff.org		✓
Tara Thompson	Community Partnership for Children	tara.thompson@cbcuf.org	✓	✓
Terri Crawford	Meridian	terri.crawford@mbhci.org		✓
The Honorable Judge Janesk	Circuit 7	kjaneske@circuit7.org	✓	✓
Wendy Hansford	Goodwill	whansford@goodwillnorthfl.org	✓	✓

Appendix B: Putnam County Data Snapshot

This appendix summarizes publicly available data as well as data collected by SMA Healthcare and Putnam County stakeholders concerning demographics, mental health, substance use, mental health, and justice indicators.

Table B1.
*Putnam County Leadership Groups**

Meeting	Frequency
Behavioral Health Forum (subcommittee: Public Safety Coordinating Council)	Monthly
Coalition for Prevention	Recently Established
Palatka Housing Authority Integrated Services Meeting	Quarterly
DJJ Council	Monthly

*It is possible this is not a comprehensive list. These were stakeholder groups identified at SIM.

Table B2.
Summary of CHS Mobile Response Team Data (July 1, 2022-December 31, 2022)

	MRT
# of Calls Received (count)	98
# Repeat Calls	39.8% (39/98 calls)
Average Response Time	11 minutes, 5 secs.
# of Face-to-Face Episodes	56
# Face to Face Episodes, Treated in Place	55.4% (31/56 episodes)

Table B3.
Summary of Putnam Sheriff's Office MH Calls & CIT Training

PCSO	06/2022-12/2022
LEO trained in specialized response (e.g. CIT), percent of sworn (%)	53%
# MH Calls handled by trained LE	60
MH crisis calls handled by trained LEO, percent (%)	50%

Table B4.
Involuntary Baker Act Examinations by Receiving Facility

Receiving Facilities	Involuntary Exams in FY 2021-2022 % County Total
Flagler Hospital	31.53%
Halifax Psychiatric Center – North	16.06%
UF Health Shands Psychiatric Hospital	11.85%
Meridian Behavioral Healthcare – Gainesville	9.64%
SMA Healthcare- Chet Bell Crisis Center	6.43%

Source: (Baker Act Reporting Center FY 2021-2022 Annual Report, 2023)

Table B5.
*Putnam County Civil Citation Data**

Month	Youth CC Eligible	Issued CC (count / %)
July 2022	1	0
August 2022	3	3
September 2022	13	12
October 2022	15	15
November 2022	6	6
December 2022	5	4
January 2023	15	12
February 2023	6	6
March 2023	9	7
April 2023	5	4
May 2023	7	6
June 2023	3	0
Total	88	75 (85%)

*(Retrieved from Florida Department of Juvenile Justice)

Appendix C: Resources

Web Resources

Partners

Criminal Justice, Mental Health, and Substance Abuse Technical Assistance Center (CJMHSATAC)

<http://www.floridatac.org/>

Louis de la Parte Florida Mental Health Institute- Department of Mental Health Law and Policy (MHLPI)

<http://www.usf.edu/cbcs/mhlp/>

Florida Alcohol and Drug Abuse Association

<https://www.fadaa.org/>

Florida Department of Children and Families (DCF)- Mental Health and Substance Use

<https://www.myflfamilies.com/service-programs/samh/>

Policy Research Associates (PRA)

<https://www.prainc.com/>

SAMHSA's GAINS Center for Behavioral Health and Justice Transformation

<https://www.samhsa.gov/gains-center>

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

The Substance Abuse and Mental Health Services Administration (SAMHSA)

<https://www.samhsa.gov/>

Center for Mental Health Services

<https://www.samhsa.gov/about-us/who-we-are/offices-centers/cmhs>

Center for Substance Abuse Prevention

<https://www.samhsa.gov/about-us/who-we-are/offices-centers/csap>

Center for Substance Abuse Treatment

<https://www.samhsa.gov/about-us/who-we-are/offices-centers/csat>

Homelessness Programs and Resources

<https://www.samhsa.gov/homelessness-programs-resources>

National Center for Trauma Informed Care (NCTIC)

<https://tash.org/nctic/>

National Clearinghouse for Alcohol and Drug Information

<https://clearinghouse.fmcsa.dot.gov/>

SAMHSA Grant Announcements

<https://www.samhsa.gov/grants/grant-announcements-2021>

Evidence-Based Practices Resource Center SAMHSA'S Knowledge Network

<https://www.samhsa.gov/ebp-resource-center>

Other Web Resources

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