JUDICIAL AND LAW ENFORCEMENT TASK FORCE

December 16, 2015 4:30 p.m. meeting Roger B. Wilson Boone County Government Center

Present at the meeting:

Bernie Andrews, Joel Blackburn, Steve Hollis, Danielle Easter, Chris Fitzgerald, Kelly Wallis, Rick Gowdy, Bob Aulgur, Kelli Canada, Michael Trapp, Budd Anliker, Jacob Clifford, John Esterly, Mary Epping, Kim Shaw, Janet Thompson and Rusty Antel, Chair.

Rusty called the meeting to order at 4:30

Janet gave a brief update on the Stepping Up Initiative in Boone County, highlighting (a) the application for the SAMHSA Grant, which would provide us a workshop here in Boone County to flesh out how Boone County can utilize the Sequential Intercept Model; (b) the application for the NACo grant to attend a workshop in Washington, D.C., to explore with experts and other counties how to make progress toward the aims of the Initiative; (c) our new collaboration with the School of Social Work, specifically with Dr. Kelli Canada, the director of the Integrative Behavioral Health Clinic; (d) our contacts with Dr. Steve Lamberti, a psychiatrist from the University of Rochester who has developed what might be a viable approach for Boone County.

Rusty then mentioned that Rusty, Janet and Kelli will be attending the CIT Annual Conference, scheduled for March 29, 2016, which will be held at the Executive Center, and for which early bird registration is only \$40/person. Rusty encouraged everyone to take advantage of this learning opportunity. Rusty also noted that by our next meeting, we should be ready to divide into work groups to address, in a more workable way, the issues presented.

Dr. Rick Gowdy, from the Department of Mental Health, then spoke about the work of his Department, and the Department's goals for the future. He noted that because of federal funding restrictions, DMH has tried to spin resources out into the community. He called attention to the seven hospitals across Missouri that are intended to care for those patients admitted under Chapter 552-they are in Kansas City, Fulton, St. Joe, St. Louis and Farmington. He further noted that, while DMH has a finite budget and a finite number of beds available, they can't control when the patients enter or leave the hospital. He stated that, because they are at capacity at all times, they have to schedule admissions for when a bed is available. He acknowledged that this means that, although a judge may have ordered someone placed with DMH, there may be a delay in that happening because a bed simply isn't available. He told the group that a new budget item is for a Metro Psych Center, in the St. Louis area, which will provide 25 new beds to utilize for those "incompetent to stand trial" admissions. He noted that, even with those 25 additional beds, DMH would still have 15 people on their wait list.

Dr. Gowdy then noted that, from his perspective, the answer is not just to have more beds but to be diverting people from the system early on. He stated that the Sequential Intercept Model was an excellent tool by which to understand the issues and to allocate resources. He noted that in various circuits, they have had marked success in diversion through various methods and by having various partnerships. For instance, Paige Bellamy, the Prosecutor in Jackson County, has been working with DMH to divert to treatment those folks who CAN be diverted without endangering themselves or the community. But, critically important for that model to work is the network of services that is provided to the person so s/he isn't released to nothingness. He noted that Judge Jim Sullivan in St Louis is using the mental health court as one of the diversion mechanisms.

Dr. Gowdy then spoke about some exciting new things from DMH that should help law enforcement, which are, in large part, aspects of Missouri's Strengthening Mental Health Initiative.

The first component is CIT (Crisis Intervention Team) training for law enforcement. Dr. Gowdy reiterated that the conference (which provides POST certification hours) is March 29, 2016.

(If you want to attend, please contact Katie Horstman at <u>khorstman@mocoalition.org</u> or 573-634-4626 ext 110. To get the early bird discount price of \$40, they need to receive your registration by February 15, 2016.)

The second component is the Community Mental Health Liaison positions. There are 31 of these individuals across Missouri and take referrals only through law enforcement and the courts. Anna White is Boone County's Liaison, and she serves a total of nine counties, so her time here is limited. Dr. Gowdy noted the training opportunities in behavioral health areas that the Liaisons can provide to law enforcement, including 1. Understanding mental health, 2. Understanding co-occurring conditions—mental health and substance use discorders, 3. Recognizing warning signs of suicide and selfharm, 4. Understanding civil involuntary detention and hospital procedures, 5. De-escalation—responding to individuals in a mental health crisis, 6. Resiliency and battlemind—how officers cope.

The third component is the Emergency Room Enhancement (ERE) project, which is available here in Boone County. (seemed as though many of us didn't know this! In Boone County, Dr. Gowdy stated, the program is connected with Burrell). This process creates planning groups that include representatives from community mental health centers, substance use disorder treatment programs, hospitals and law enforcement to create strategies for identifying target individuals in the ER, assessing needs, coordinating care and assuring linkage to ongoing services and supports in the community.

Dr. Gowdy then spoke about "coming attractions" from DMH. The first is a "1115 medicaid waiver" program, intended to target with services those in the 21-35 year old population, who are in need of mental health services. The idea is that if we can intervene early in these people's lives, we can get them stable

and employed. DMH has applied for funding for this project to the Center for Medicaid Services. The second is to seek grant funding for a program that would provide incentives for good outcomes at certified behavioral health centers. Missouri is one of the states that is in the application process and has made it out of the first two phases. Senator Blunt is apparently pushing to get funding for most if not all of the states in the application process. The third is a method of integrating and enhancing crisis services, by using CIT, ERE and other services, such as those available through our Liaisons.

During the Q&A portion of the meeting, Dr. Gowdy noted how difficult it is for small or rural law enforcement agencies to send their officers for CIT training since that is an enormous commitment of an officer and may leave the department untenably short-staffed.

Dr. Blackburn noted the need for case management services at the Boone County Jail, since, in his experience, the weak link is to have folks hooked up with services before they leave the jail.

A common theme among the participants was the need for better communication among all of the players, so that everyone knows who has the services, and who can help in crafting solutions when problems crop up. Dr. Gowdy noted that if DMH were not so flooded with offenders who are nonviolent and maybe were just in on a misdemeanor, they could more easily manage their caseload. He noted that one part of the solution is for the prosecutors to be willing to exercise their discretion to divert, rather than prosecute, those who won't pose a safety risk to themselves or the community. He again noted the example of Paige Bellamy in Jackson County. The message the group heard repeatedly was that we must give law enforcement the tools they need AND the time they need to effectively use the tools.