

Program Narrative

Statement of the Problem (20%)

Indianapolis-Marion County is the 12th largest city in the U.S., the state capital and largest city in Indiana, with a population of 928,281 in a 403 square mile area. Each year approximately 50,000 offenders flow through the local jail system, with facilities, capacity and utilization as follows:

Facility	Census 3-11-15	Capacity	ALOS*
Jail 1	922	1,235	130.85
Jail 2	978	1,260	84.65
Hope Hall	71	103	24.11
Inmate Workers	17	35	3.66
Total	1,971	2,633	

*ALOS (average length of stay) includes 59 sentenced and 1,912 non-sentenced.

The jail's mental health professionals estimate that of the 50,000 people flowing through the local jail system, 30% are mentally ill, 85% have substance abuse disorders, and a large portion are dually diagnosed. (National studies have shown that 72% of people in jail with serious mental illness also have substance abuse issues). Many of these people cycle through the justice system repeatedly, in part because they have not become connected to ongoing treatment. An unintended consequence of the "deinstitutionalization movement" has been a population shift from psychiatric hospitals to jails and prisons over the last few decades. Jails and prisons are now populated with offenders who could be better served in behavioral health programs than in jail.

Indianapolis has initiated several innovative strategies to better address justice and mental health issues at various stages of the justice system pursuant to the sequential intercept model. For example, for at least ten years justice officials have partnered with NAMI to train a portion

of police officers in the Crisis Intervention Team (CIT) model. Now (2015 and beyond) the local goal is to train ALL police and emergency medical/first responders in CIT, starting with the police recruits who are now being CIT trained. For many years the Marion County Prosecutor and courts have implemented mental health diversion programs for mentally ill and dually diagnosed offenders. Also for many years Marion County has operated Mental Health Treatment and Drug Treatment Courts. Further, the Mayor's Office, Department of Public Safety, Sheriff's Office and community partners have instituted special reentry programs for mentally ill and dually diagnosed offenders.

Despite these efforts, the paucity of community mental health services and potential for jail overcrowding has been a persistent concern of local officials and reached a peak this year with the passage of a state sentencing reform law, HEA 1006, providing that people sentenced for low level offenses will remain in their home communities instead of being incarcerated at state facilities. This change, while positive, shifts significant pressure to the local level, with already crowded jail and community corrections systems. The new criminal code is expected to divert about 7,500 offenders to Marion County each year, putting much more pressure than ever on local officials to find alternatives to incarceration, especially to find better alternatives for the mentally ill and dually diagnosed who are inappropriately and inadequately housed in jails.

In 2014 local officials completed an efficiency study and convened a Mental Health Review Team to analyze and develop a framework for addressing mental health issues. Two of the primary recommendations, the ones local partners propose now, are 1) to provide **additional CIT training** and 2) to open an **Engagement Center**. CIT training has been partially implemented and now partners propose to expand it. The need for an Engagement Center – an alternative to arrest on the front end of the system, a facility where first responders can take

people who are mentally ill or dually diagnosed as an alternative to their arrest and incarceration for non violent offenses -- has been discussed without resolution for at least 20 years. Local justice and mental health partners now propose to provide additional CIT training and open/operate a new Engagement Center.

Project Design and Implementation (40%)

Overview

Based on preliminary planning and consensus building, local officials propose to provide additional CIT training and open/operate/ implement an **Engagement Center**.

With DOJ Planning and Implementation grant support and guidance, Indianapolis will address Priority Consideration A. Law Enforcement Response Programs

- Developing a specialized **receiving/diversion center** for individuals in custody of law enforcement to assess mental health and co-occurring mental health and substance use treatment needs and refer to/provide appropriate evaluation and/or treatment services.

Indianapolis will also address Priority B. Training for criminal justice, mental health and substance use treatment personnel.

- Training that offers specialized and comprehensive training for law enforcement personnel in procedures to identify and respond appropriately to incidents in which the unique needs of individuals with mental disorders are involved, such as **Crisis Intervention Team** training, so that first responders can help identify potential clients for the Engagement Center.

Currently about 600 police officers have been through CIT training and with grant support another 150 police and first responders will be trained. Indianapolis will provide CIT training for all new police recruits at local expense. CIT training will be useful in ensuring that mentally ill and dually diagnosed offenders are referred to proper services, including the proposed Engagement Center

The Engagement Center will be located on the 2nd floor of the Arrestee Processing Center operated by the Marion County Sheriff and will be staffed by a combination of social workers, health providers and law enforcement officials. Partially funded by a private foundation grant and local funding, it will have capacity for 30 beds where mentally ill/dually diagnosed people can stay for a minimum of 4 hours, maximum of up to two weeks to stabilize while connecting with referral agencies/providers.

Lead partners are the Indianapolis Department of Public Safety (Indianapolis Metropolitan Police Department and Indianapolis Emergency Medical Services), Marion County Sheriff's Office, and Midtown Mental Health Center, along with a team of about 45 agencies providing related services. Partners anticipate diverting at least **5200/2080** people (duplicative count including repeaters) from incarceration (30 beds * 5 day average LOS per client * 95% occupancy = 2080 clients/year * 2.5 years = 2080), instead linking them with needed social, health, housing, and emotional support services. Anticipated outcomes are to provide more appropriate treatment and reduce unnecessary incarceration for this population.

Target Population/Admissions

The target population will be adults age 18 and over, indigent and non indigent, residents and visitors to Marion County, with co-occurring mental health and chronic substance abuse

diagnoses, whom service providers may be able to assist. Per grant guidelines they will be people who:

- Have been diagnosed as having a mental illness or co-occurring mental health and substance abuse disorder; and
- Have faced, are facing, or could face criminal charges for a misdemeanor or felony that is a nonviolent offense.

Individuals will come to the Engagement Center following contact with law enforcement which results in involuntary, in-custody transport to the Arrestee Processing Center by the Marion County Sheriff. Individuals not in custody may also self report through the front door of the APC or may be referred by a street/outreach team. Upon arrival at the APC clients will be screened for EC participation/eligibility and then given the option of going through the EC as an alternative to formal prosecution screening.

During the planning period partners will evaluate the **screening and assessment tools** listed in the RFP for 1) co-occurring disorders in the justice system and 2) a brief jail mental health screen. Partners will compare these to current local screening tools and select the optimum validated, evidence based screening and assessment tool(s) for this project. *Currently partners use the Patient Health Questionnaire 9 (PHQ9) for depression, GAD screening tool for general anxiety disorder, and Clinical Institute Withdrawal Assessment of Alcohol Scale, Revised (CIWA-AR) screening tool.* Partners will refer to SAMHSA's Guide to Evidence-Based Practices at www.samhsa.gov/ebpwebguide.

EC clients will be processed through ordinary identification procedures at the APC (as though they had come to the APC via a typical arrest). The identification process will help confirm their eligibility for EC services and determine if the client has open warrants, and ICE

hold, or other out of county holds. The identification process will include a check of any protective orders to ensure than no client will encounter a person covered by a non contact order. Males and females will be separated. Clients will be searched for weapons and contraband. The EC will include a security area with camera monitoring. Clients will be subject to eligibility protocols and determinations established by the Marion County Prosecutor's Office. EC clients will be **out of custody** at the point of entering the EC.

Staffing

The EC will be located on the second floor of the APC, a non secured location, operated **24/7**. Services will be provided by blended **teams of certified/trained social services providers**, multi entity task forces of intervention teams. Some of the possible providers/agencies are listed in the *section on capabilities and competencies*. Staff and volunteers will be cross trained to operate the EC, trained in trauma informed care and other best practices. **Security** will be provided at the EC facility by a Sheriff's deputy 24/7. To support non-medical detox, the EC will include a paramedic, LPN, RN, and medical provider (possibly the contractual medical provider for the jail).

The EC (30 beds) will be staffed at local expense by

- An Engagement Center Coordinator
- Shift Managers
- EMT/Paramedic (estimate 2 onsite at all times)
- Social Workers (estimate 4)
- Sheriff's Deputy for security
- Various service providers listed elsewhere, including Peer Supporters

Consumers and advocacy organizations, such as NAMI and Mental Health America of Greater Indianapolis, have been involved in project design and will serve on the Project Team that completes the J&MH plan and oversees implementation.

EC will provide a temporary safe location, assistance in connecting to services and providers, and a limited number of **non-medical detox** beds. Local service providers have agreed to accept non medical detox patients after a client has spent up to 72 hours in the EC detox if they are actively participating in treatment and a discharge plan. Clients will need counseling, peer mentoring and aftercare arranged with service providers on site. Mental health clients will undergo medical stabilization procedures prior to release for outpatient follow up. Clients in need of **medical detox** will be referred to local emergency departments via a call to 911 after they have been stabilized. EMT's will monitor clients and dose according to detox protocols if symptoms appear. Detox medication will be onsite and available to initiate the detox process.

Timelines

Timelines will vary based on individual needs, with a focus on recovery readiness support and stages of change engagement. It will be necessary to assess the clients, stabilize them and/or initiate the detox process, obtain clinical sobriety, and then engage them with service providers/programs for follow-up care. Stays may be as short as 4-12 hours (4 hour minimum to provide safe shelter, reduce intoxication, provide initial link with a resource coordinator to offer services) and as long as two weeks. An average stay will be 72-120 hours (3-5 days for a Recovery Engagement Program).

The Prosecutor may opt to return individuals not participating in the engagement process with service providers back to the APC for further processing and filing of criminal charges.

Goals/Outcomes

Among **goals/positive outcomes identified** in the efficiency study for the Engagement Center are these:

- Increase by +150 the number of first responders who are CIT or Advance CIT -trained.
- Reduce police and ambulance/911 recidivism by diverting frequent users to other services
- Reduce Emergency Department (ED) recidivism
- Reduce the number of people processed by the Arrestee Processing Center (APC) for public intoxication offenses
- Reduce the number of people coming to the City County Building (CCB) for court hearings
- Reduce the number of people needing Sheriff transport from the Arrestee Processing Center (APC) to Jail 1, Jail 2, and the CCB
- Reduce the number of failure to appear incidents (FTA) and subsequent efforts by law enforcement and court staff associated with FTAs
- Provide a safe location to sober up
- Improve patient outcomes
- Provide effective alternatives to incarceration and processing through the court system
- Decrease chronic disease
- Direct clients to appropriate medical/outpatient detox and social service providers
- Reduce system-wide costs associated with arrest, prosecution, ambulance transports, MCSO transports, ED visits, and court processes

- Relieve pressure on resources for police, fire, ambulance, prosecutors, MCSO, public defenders, and hospitals, making those resources available for use by higher acuity, lower frequency needs
- Work with clients to identify services needed to reduce repeated interactions with law enforcement
- Engage clients into mental health, alcohol/drug treatment rehabilitation, and homelessness services

Partners have obtained a grant from a local private donor/foundation (Reuben Family Foundation) to support a portion of start up costs for the EC as local match and the City County Council authorized funding for a portion of operating costs. The proposed federal J&MH grant will be used to support remaining operating costs for the first 24-30 months while the effectiveness of the EC is demonstrated and permanent funding is sought, authorized, and secured.

Capabilities and Competencies (20%)

Lead partners are the Indianapolis Department of Public Safety – Indianapolis Metropolitan Police Department, Marion County Sheriff’s Office, and Midtown Mental Health Center, along with the following agencies that will be engaged as the planning team for the Justice and Mental Health grant (most also Mental Health Review Team members:

Justice & Mental Health Team (most on Mental Health Review Team)	
Justice	Health/Mental Health
Indianapolis Department of Public Safety	Midtown Mental Health Center
Indianapolis Metropolitan Police Dept.	Mental Health America of Greater Indy
Indianapolis Emergency Medical Services	Mental Health Director, MC Jail
Marion County Sheriff’s Office (jail admin)	Community Hospital
Marion County Prosecutor	Health & Hospital Corporation/Eskenazi
Marion County Community Corrections	MC Public Health Department
Marion County Probation Department	National Alliance for the Mentally Ill

	(NAMI)
Indianapolis Fire Department	Coalition for Homelessness Intervention and Prevention (CHIP)
Marion County Superior Courts	MC Reentry Coalition

Partners have also identified about 45 agencies that may provide onsite services, referral services, shelter, or outreach/case management.

Potential Onsite Service Providers/Referral Agencies:	Street Outreach Teams/ Case Management:
Correct Care Solutions (CCS)	Adult and Child MHC
Midtown MHC	The Damien Center
St. Vincent's	Eskenazi Health
Horizon House	Homeless Initiative Program
Progress House	Hoosier Veterans Assistance Program
Salvation Army	Horizon House Street Outreach Rapid Response Team (SORRT)
Wheeler Mission	Humane Society
Veterans Administration	Indianapolis EMS/MESH
Mexican Consulate	IMPD Homeless Unit
MC Probation	Midtown CMHC
Peer Recovery Supports	MC Probation
Gallahue Mental Health Ctr	Outreach Inc.
Project HOME	Parole District 3
Dove Recovery House	The Pourhouse
Fairbanks	Roudebush VA Medical Center
Pathways to Recovery	Ruth Lilly Salvation Army Women and Children's Center
City Mosaic	Tear Down the Walls Ministry
Food for Souls	Wheeler Mission Center for Women and Children
Hazelwood Church	Wheeler Mission Ministries for Men
Meet Me Under the Bridge	Shelters:
Purpose of Life Ministries	Dayspring Family Shelter
Tear Down the Walls	Holy Family Shelter
Helping Our Own People	Ruth Lilly Salvation Army Women and Children's Center
	Salvation Army Adult Rehab Center (ARC)
	Wheeler Mission Ministries for Men
	Wheeler Mission Ctr for Women & Children

The **Department of Public Safety** will administer the grant. It oversees the Indianapolis Metropolitan Police Department, Fire Department, Emergency Medical Services, Homeland Security, and related public safety entities, i.e. the first responders who will bring clients to the Engagement Center. DPS has extensive experience in managing a local budget of \$379,500,000 per year (2015) and over \$100 million in federal grants, including DOJ grants for Weed & Seed, COPS, Byrne, Human Trafficking, Domestic Violence, and Cold Case. DPS will designate/hire an **Engagement Center Coordinator** to oversee the planning and implementation phases of the grant.

The Marion County Sheriff's Office (MCSO) administers the jail system including the Arrestee Processing Center which will house the Engagement Center and provide security for the EC. The Sheriff's Office employs over 900 civilians and deputies and administers an annual budget of **\$111,809,407**, half for jail facilities. The Sheriff's Office is experienced in collaborative efforts such as this one. It is committed to improving services for the mentally ill and addicted people who are incarcerated, as well as reducing their over-incarceration. The Sheriff's Office serves as a member of the Criminal Justice Coordinating Council, chaired the Mental Health Review Team, and serves as a member of the Marion County Re-entry Coalition.

Midtown Mental Health is a full service community mental health center based at Eskenazi Health/Health and Hospital Corporation, with a staff of 602 and annual budget of \$60 million. It will coordinate substance abuse and mental health services for the Engagement Center, with referrals to a variety of health, mental health, substance abuse, housing, and human service providers (listed above).

Eskenazi Health Midtown Community Mental Health, Indiana's first community mental health center, provides comprehensive inpatient and outpatient services for all types of emotional

and behavioral problems, including severe mental illness and substance abuse. Eskenazi Health Midtown's philosophy of care stresses strength-based, family- and community-centered treatment. Care decisions are team-based and emphasize family and patient participation. Eskenazi Health Midtown is licensed by the State of Indiana as a community mental health center and addictions service provider. Its treatment philosophy is known as the *recovery model*, emphasizing the strengths and resources each person brings to the challenge of resuming a fully productive life.

Among its services, Eskenazi/Midtown offers:

- Acute stabilization services (24 hour emergency care with psychiatric assessment, risk assessment, screening for inpatient psychiatric treatment, psychiatric consult on medication)
- Addiction services
- Adult community based services (medication clinics, nursing, therapies, case management, psychotherapy, addiction integrated services, specialized services for persons with mental illness and developmental disabilities and persons living with HIV/AIDS, intensive wrap around services for persons with multiple challenges, young adult services, and more)
- Outpatient groups
- Assertive Community Treatment Teams
- Drop In Program
- Prevention & Recovery Center for Early Psychosis
- Supported Employment
- Transitional Housing and Shelter

- Youth Services

Like many service providers in Marion County, Midtown staff members have been trained to provide trauma-informed care and other evidence based best practices.

The EC will be staffed by

- Engagement Center Coordinator
- Shift Managers
- EMT/Paramedic (2 onsite at all times)
- Social Workers (4)
- Sheriff's Deputy for security
- Various service providers listed above, including Peer Supports

Support/commitment letters from partners are attached.

Plan for Collecting Data for Performance Measures (10%)

DPS/IMPD and partners will complete/submit quarterly performance metrics using BJA's online Performance Measurement Tool (PMT). Local partners are familiar with using the PMT on previous projects.

Partners will also work with faculty from Indiana University Purdue University at Indianapolis/School of Public and Environmental Affairs -- e.g. Professor (b)(6) a biostatistician -- to gather data about participants, their health/mental health status, and the effectiveness of the Engagement Center in connecting participants with services as an alternative to arrest and in reducing the number of repeated arrests of the same people for non violent offenses.

During the planning phase partners will develop a written data collection plan to track clients, using a system such as Client Track, which was used by DPS and Midtown on a previous

project. For this project partners will select a similar case management system to monitor participant services and progress. Clients will also be monitored for recidivism or re-engagement with the local justice system. Partners have set aside 10% of the budget to implement the data collection plan. EC staff will be assigned clear roles in tracking and compiling data.

Please see the section on Project Design and Implementation for a list of project **goals and expected outcomes that will be tracked** to supplement the PMT data.

Plan for Measuring Program Success to Inform Plans for Sustainment

Substantial stakeholder support has already been generated during the preliminary planning process, with unanimous support for the Engagement Center among planning team members (listed above). The City County Council has authorized partial funding for a portion of start up costs and a substantial donation/grant has already been made by a private local foundation to fund capital costs and a portion of start up costs for the EC.

The effectiveness of the EC in reducing recidivism, reducing costs, increasing efficiency of the justice system, improving mental health and addictions treatment, and improving client outcomes will be measured and reported with assistance from IUPUI faculty. Results will be used to justify sustaining the EC project on an ongoing basis.

With performance data, the project will be presented to the Criminal Justice Planning Council (which makes short and long term funding recommendations about the criminal justice system) and City County Council for future funding consideration.

The Marion County Criminal Justice Planning Council's voting members are:

- Mayor of the City of Indianapolis
- Public Safety Director

- Marion County Sheriff
- Controller of the City of Indianapolis
- Marion County Prosecutor
- Presiding Judge of the Marion Superior Court
- Marion County Clerk
- Chairperson of the City County Council Public Safety Committee
- Member of the City County Council appointed by its minority leader
- President of the City County Council
- Chief Public Defender

Efforts to sustain the Engagement Center and codify it in local ordinance(s) will be brought before the Criminal Justice Planning Council and the City County Council.