



Pinellas County, Florida:

The participants in the workshop included 25 individuals representing multiple stakeholder systems, including leadership from DCF, mental health, substance abuse treatment, human services, corrections, law enforcement, advocates, consumers, county government, state attorney and public defender offices, and the courts¹. A complete list of participants is available at the end of this document. Mark Engelhardt, M.S., MSW, ACSW, Kathy Moore, Ph.D., and Jessica Mitchell, Ph.D. from USF-FMHI facilitated the workshop session.

Objectives of the Cross-Systems Mapping Exercise

The Cross-Systems Mapping Exercise had three primary objectives:

1. The development of a comprehensive picture of how adults with mental illness, substance abuse and co-occurring mental health and/or substance use disorders flow through the Pinellas County criminal justice system along five distinct intercept points: Law Enforcement and Emergency Services (Intercept 1), Initial Detention/Initial Court Hearings (Intercept 2), Jails and Courts (Intercept 3), Community Re-entry (Intercept 4), and Community Corrections/Community Support (Intercept 5).
2. The identification of, strengths, gaps, resources, and opportunities at each intercept point for individuals in the target population.
3. The development of priority areas for activities designed to ETBT1JE

A DCF and County Commission approved Pinellas County transportation exception plan for persons in need of acute behavioral healthcare under the Baker Act (voluntary or involuntary)

A number of homeless outreach teams

A history of Crisis Intervention Team (CIT) training throughout the county

Pinellas County Cross-Systems Map Narrative

The following information reflects the information, often verbatim, gleaned during the *Cross-Systems Mapping* Exercise. These participant notes include a description of potential interventions at each intercept point in the Criminal Justice and Behavioral Health System as perceived by the participants during the mapping process. Gaps in service delivery and resource opportunities are identified at each intercept point. These notes may be used as a reference in reviewing the Pinellas County Cross-Systems Map and as a tool in developing a formal strategic action plan and/or updated Memorandum of Understanding among community stakeholders and local planning entities.

Intercept I: Initial Contact w/ Law Enforcement, Prevention Programs, or Emergency Services

Identified Strengths and Resources

Pinellas County

receive CIT
and

partnerships with service providers

About 30% Of the PCSO Officers are CIT Trained

16+ years of CIT implementation

Some municipalities see CIT as training vs. specialized team

Banyan Tree Transitional Program, Non-Profit (501(c)(3))

Wellness checks available (proactive)

Homeless outreach teams (Directions for Living, Law enforcement, Operation

Other BA receiving hospitals:

Windmoor, Largo Medical, Morton Plant

Detoxification Options

16 DCF and 2 County funded beds non-secure social detoxification

Length of stay -Usually 5 days 85-90% capacity

Safe Harbor (470 beds diversion from jail; about 80% have SAMH, or Co-occurring disorder and all are homeless Tool = Vulnerability Index- Service Prioritization Decision Assistance Tool (VISPDAT) and TBIN assessment tools to examine high utilizers/most vulnerable to connect with services about 30% high utilizers in and out of system)

20 social detoxification beds at Mustard Seed for person diverted that needs to sober

Windmoor (private Baker Act receiving facility)

Turning Point (65 beds)

Pinellas Hope Tent City intake on specific days
users under influence (Up to 270 people in tents)

Safe Harbor Shelter

470 beds available

No time limit

Used as a triage to other shelters

Safe Harbor takes clients to services off site

Identified Gaps Law Enforcement / Emergency Services (Intercept 1)

Some municipalities do not have the capability to send a CIT officer

Data is not being collected on CIT calls that resulted in a jail diversion no tracking

Some police departments are on different reporting systems, limiting access to records of utilizers and tracking data

No locked facility for Marchman Act (MA) except jail sent to jail for less than 24 hours to sober up (About 1,400 to 1,500 MAs annually)

No supportive housing programs straight from diversion

May have initial diversion to BA at hospital, but then released and rearrested
no referrals out of hospital let out on street

Specific healthcare pod for most severe inmates with SAMH

Medical detox available at jail

Pregnant women provided methadone by DACCO all others go through detox

Pilot Project Central Florida Behavioral Health Network receives daily arrest data from the jail and send it to Suncoast Center, Inc. to notify case-managers about clients arrested and released

Recovery Project

that has a written agreement with one judge

30-40 clients

Identified Gaps Initial Detention and Court Appearance (Intercept 2)

Brief jail screening, but no connections to services and held less than 24 hours

Limited in-reach within jails

Limited questions at intake about whether they are receiving services in the community

Intercept III: Jails / Courts

Identified Strengths

Division Z program to divert from prison
Smart Probation Program refers individuals to SAMH services
Thinking for Change (T4C) Program
Supported employment opportunities available through select agencies: Boley Centers, Vincent House, Career Choice Pinellas, and Department of Corrections specialist

Identified Gaps - Community Corrections / Community Support (Intercept 5)

No identification of how many of Violation of Probation (VOPs) are those with SAMH
No outreach or follow

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**Priority Area : Leadership/Coordination
[All Intercepts]**

Objective	Action Step	Who	When
-		-	

**Priority Area : Jail In-Reach
[Intercept 3]**

Objective	Action Step	Who	When

**Priority Area : Centralized Receiving Facility and ARF
[Intercept 1]**

Objective	Action Step	Who	When

Conclusions: Summary

The Cross-Systems Mapping workshop resulted in the acknowledgment of a challenging list of service gaps and opportunities for systems and program improvements. Pinellas County has a long history of collaborative relationships, but is

First, the individuals who participated in this workshop represented most of the major stakeholders necessary to accomplish change in this area. (see attached list)

Second, participants were enthusiastic and candid in their comments and observations. This spirit of collegiality and willingness to discuss limitations as well as strengths is an important part of being able to work across systems, as is necessary in improving the lives of adults with mental illnesses/substance abuse disorders in or at risk for entering the criminal justice system.

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Website Resources and Partners	
Florida Criminal Justice Mental Health and Substance Abuse Technical Assistance Center	www.floridatac.org
Louis de la Parte Florida Mental Health Institute Department of Mental Health Law and Policy	http://mhlp.fmhi.usf.edu
Florida Partners in Crisis	http://www.flpic.org
Justice Center	www.justicecenter.csg.org
Policy Research Associates	www.prainc.com
National GAINS Center/ TAPA Center for Jail Diversion	www.gainscenter.samhsa.gov

Other Web Resources	
Center for Mental Health Services	http://beta.samhsa.gov/about-us/who-we-are/offices-centers/cmhs
Center for Substance Abuse Prevention	http://beta.samhsa.gov/about-us/who-we-are/offices-centers/csap
Center for Substance Abuse Treatment	http://beta.samhsa.gov/about-us/who-we-are/offices-centers/csat
Council of State Governments Consensus Project	www.consensusproject.org

5

CPL Tom Kelley	Corporal - CIT		Law Enforcement
Michael Jalaz	CEO/ED	Pinellas Ex-Offender Re-Entry Coalition	Planning Coalition
Mark Duvfa	Executive Director	Catholic Charities	Service Provider
Barbara Daire	President and CEO	Suncoast Center	Service Provider
Dr. Jessica Mitchell	CJMHTA TA Center Coordinator	University of South Florida/FMHI	Research University
Dr. Kathleen Moore	Research Associate Professor	University of South Florida/FMHI	Research University
Mark Engelhardt	CJMHTA TA Center Director	University of South Florida/FMHI	Research University

