Letter from Diversion First Leadership

About one in five Americans has a mental health issue. In our county jail, the percentage is much higher. In 2015, Fairfax County launched Diversion First so that incarceration would no longer be the default solution for individuals experiencing a mental health crisis. All of us agree that jail is not the most appropriate place to provide mental health treatment.

In the first year of this collaborative program, we focused on diverting individuals in our community at the point of potential arrest. What steps did we take?

- We built and fostered relationships among a broad group of stakeholders, including law enforcement, mental health providers, advocates and county government leaders.
- We opened the Merrifield Crisis Response Center and put police officers and sheriff’s deputies on-site to accept the transfer of custody, allowing responding officers to return to their duties more quickly.
- We focused on training first responders in crisis intervention and mental health first aid.
- We expanded our mobile crisis response team in the community.
- We developed extensive community outreach tools to raise awareness about Diversion First and what it means for mental health consumers and their families and caregivers.

Despite our successes, there have been some challenges. Perhaps the biggest hurdle this first year has been allocating – and funding – sufficient staff to support our commitments. Each partner agency has had to assign additional employees dedicated to ensuring that those in need of mental health treatment receive the best care possible. Also of concern is where to place people who require a longer-term solution beyond the initial assessment and services they receive at our Merrifield Crisis Response Center. For example, we need more bed space and affordable permanent supportive housing in our community. Beyond this, we need to expedite medical screenings and seek more funding in 2017.

What else is on the horizon for our second year? Our leadership team will continue to engage local judges, court services, prosecutors and public defenders to bring our program into the court system as an alternative to criminal prosecution. Also, we will evaluate data and case scenarios to look for gaps in service and ways to improve the diversion process.

We are committed to working with the community to ensure all residents are treated with dignity and respect. Thank you for your continued support of our Diversion First program.

Sincerely,

Tisha Deeghan, Executive Director, Fairfax-Falls Church Community Services Board
Stacey Kincaid, Fairfax County Sheriff
Edwin C. Roessler, Jr., Fairfax County Police Chief

375 people were diverted from potential arrest in 2016.
What is Diversion First?

Diversion First offers alternatives to incarceration for people with mental illness or developmental disabilities who come into contact with the criminal justice system for low level offenses.

The goal is to intercede whenever possible to provide assessment, treatment or needed supports. People needing diversion may also have a substance use disorder, which often co-occurs with mental illness.

Diversion First is designed to prevent repeat encounters with the criminal justice system, improve public safety, promote a healthier community and is a more cost-effective and efficient use of public funding.

What is Our Commitment?

Fairfax County recognized that our jail had become a warehouse for people with mental illness. Responding to local and national trends urging governments to find alternative solutions, our leadership created Diversion First to offer treatment to those in need rather than defaulting to incarceration. As part of this commitment, the county also signed on with larger, national programs including the Stepping Up Initiative and the White House Data-Drive Justice Initiative.

Why is it Necessary?

Diversion First was implemented because...

- **Too many people are in jail** due to mental health issues. Jail is not the appropriate place to provide mental health treatment.
- **There is a need to prevent the incarceration of people** with intellectual/developmental disabilities.
- **Intervening at the earliest point possible** may de-escalate situations and help avoid arrest.
- **It is less costly** for people to receive treatment instead of spending time in jail.
- **Treatment reduces recidivism** and therefore reduces crime in the community.
- **Treatment offers hope** by helping people recover and take control of their lives.
- **Having a mental illness is not a crime.**

How Diversion First Can Help

Daria Akers has bipolar disorder, which is characterized by periods of depression and mania. Despite taking her medication as prescribed, she had a manic episode in 2010, was arrested for family abuse and brought to jail. She refused to take medication and eventually attempted suicide. She was declared incompetent to stand trial and sent to a state mental hospital.

Forty-five days later Daria was returned to the jail. She pled guilty and was given two years’ probation with the requirement that she see her psychiatrist and follow a treatment plan. Daria was successful, and the charges were dropped from her record. Had Diversion First been in place years ago, Daria might have been diverted to treatment rather than incarcerated.

Today, Daria is a Diversion First stakeholder. She shares her story with police officers and sheriff’s deputies during Crisis Intervention Team training. She wants them to understand that anyone, anywhere and at any time can experience a mental health crisis, regardless of their age, educational background, gender, race or socioeconomic status. She wants them to see that people like her can – and do – recover from a severe mental illness and live a happy and successful life.
Board to visit Bexar County, Texas, to learn about and bring back best practices from a nationally recognized mental health system. In August 2015, Fairfax County launched Diversion First with the goal of reducing the number of people with mental illness brought to jail. On Jan. 1, 2016, the Merrifield Crisis Response Center opened with law enforcement on-site to accept custody of individuals diverted by officers in the field.

Today, we have more county staff involved in the Diversion First effort. This represents a significant commitment of human and financial resources from a full spectrum of government agencies and includes newly created positions within the Police Department, Sheriff’s Office, Court Services and Community Services Board. Additionally, an emphasis has been placed on training staff across the county in Mental Health First Aid, with many first responders receiving the state-approved 40-hour Crisis Intervention Team training.

How Does Diversion First Work?

Diversion First is based on the Sequential Intercept Model (see below) that identifies specific points of intervention to prevent individuals from entering or moving deeper into the criminal justice system. During 2016, the county primarily focused on Intercept 1, which aims to divert – rather than arrest – people at their first contact with law enforcement.

Look for this Pin

Many police officers and sheriff’s deputies are also receiving Crisis Intervention Team (CIT) training to help them recognize symptoms of mental illness and de-escalate emergency situations on-scene. If a resident calling 911 suspects that a situation may involve a mental health issue, they may request a CIT-trained responder. Residents can identify first responders who are trained to handle these situations by the pin (pictured here) on the officer’s or deputy’s uniform.

The Sequential Intercept Model

The criminal justice system in Fairfax County is a process that moves from arrest to booking, to court appearance, and then to either probation or jail and eventual release. The Sequential Intercept Model represents the five areas in the process where diversion can intercede.
In a typical diversion scenario, a law enforcement officer arrives on the scene of a possible crime and recognizes that a person may be experiencing a mental health crisis. If the offense is minor, the officer will try to resolve the situation on-scene. If that is unsuccessful, the officer can take the individual to the Merrifield Crisis Response Center (MCRC) for a mental health assessment. If the individual will not go voluntarily, the officer can take the person by Emergency Custody Order (ECO).

**Emergency Custody Order**

An emergency custody order (ECO) gives a law enforcement officer permission to take a person into custody temporarily (up to 8 hours) in an emergency situation. This provides time for staff from the Fairfax-Falls Church Community Services Board to evaluate the person and locate a treatment facility for them if necessary.

The ECO can be issued by a magistrate, or by the law enforcement officer, when it is believed that a person:

- Has a mental illness and is highly likely in the near future to seriously harm himself or others, or to suffer serious harm due to incapacity to protect himself or to provide for his own basic needs,
- Needs hospitalization or treatment, and
- Is unwilling or incapable of voluntarily seeking hospitalization or treatment.

With an ECO, the person remains in custody until a temporary detention order is issued, until the person is released or until the ECO expires.

**Temporary Detention Order**

A temporary detention order (TDO) is an order issued by a Magistrate that requires an individual to be held in a psychiatric facility for a period of 1 to 5 days until a commitment hearing is held. How long the person is hospitalized before the hearing occurs depends on when the TDO is issued and whether there is an intervening weekend or legal holiday. Magistrates are available to issue a TDO every day of the year, 24 hours a day.

The criminal justice system in Fairfax County is a process that moves from arrest to booking, to court appearance, and then to either probation or jail and eventual release. It highlights the areas in the process where diversion can intercede.
Once a Community Services Board clinician completes an assessment at the MCRC, the patrol officer will be relieved of custody and can return to regular duties. If the clinician determines that hospitalization will not be necessary, the ECO is lifted and the individual is provided with other services. If the clinician determines that the individual needs to be hospitalized, the person will be transferred to the custody of an MCRC police officer or sheriff’s deputy. At this time, the clinician will petition the magistrate for a Temporary Detention Order (TDO) to facilitate the transfer of the individual to a hospital.

What’s Next?

In 2017, Fairfax County will look to expand the Diversion First program to address Intercepts 2 and 3 of the Sequential Intercept Model. In fact, this past year we got a jump start on Intercept 2 with 28 ECOs from the jail. Working together, the Sheriff’s Office, Community Services Board and Magistrate were able to get individuals into treatment immediately after release on bond or time served.

Work is in progress to expand mental health supports within the local court system, as well as to expand partnerships with healthcare providers to streamline medical clearances for those needing hospitalization. A housing component will launch at the beginning of the year to provide stability and long-term self-sufficiency for people who may have been incarcerated previously. First responders are also developing specific questions for their initial patient care reporting and screening to attempt identification of possible mental illness at the earliest possible contact.

Who Should I Contact?

- If a situation is immediately life-threatening, call 911. Ask for a Crisis Intervention Team officer.
- Otherwise, call Community Services Board (CSB) Emergency Services (ES): 703-573-5679 or TTY 711 for the hearing impaired.
- Or go to the Merrifield Crisis Response Center, 8221 Willow Oaks Corporate Drive, Fairfax, VA 22031. The emergency services entrance is on the lower level.

For More Information

- Request a group presentation by emailing diversionfirst@fairfaxcounty.gov.

Diversion First is a joint effort of the following Fairfax County agencies:

Diversion First will help people get treatment and become self-sufficient, reduce crime by combatting recidivism, and save money by reducing our jail population.

- Board of Supervisors Chairman Sharon Bulova
- Braddock District Supervisor John Cook
## Fairfax County Diversion First
### 2016 Year in Review - By the Numbers

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<tr>
<td>Mental health investigations in the field</td>
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<tr>
<td>- Fairfax County Police Dept.</td>
<td>831</td>
<td>916</td>
<td>900</td>
<td>919</td>
<td>3,566</td>
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<tr>
<td>- Resolved in the field (Fairfax County)*</td>
<td>471</td>
<td>505</td>
<td>479</td>
<td>504</td>
<td>1,959</td>
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<td>- Involved Merrifield Crisis Response Center (MCRC) for all jurisdictions**</td>
<td>360</td>
<td>411</td>
<td>393</td>
<td>416</td>
<td>1,580</td>
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| Merrifield Crisis Response Center/Emergency Services | | | | | |
|-----------------------------------------------------|------------|------------|------------|-----------|
| Total service encounters | 1,296 | 1,380 | 1,170 | 1,178 | 5,024 |
| - General Emergency Services (non-law enforcement involved) | 936 | 969 | 777 | 762 | 3,444 |
| - Involved law enforcement | 360 | 411 | 393 | 416 | 1,580 |
| - Voluntary transports to MCRC | 158 | 141 | 127 | 121 | 547 |
| - Emergency Custody Order (ECO transports to MCRC) | 202 | 270 | 266 | 295 | 1,033 |
| Diverted from potential arrest | 103 | 106 | 85 | 81 | 375 |
| Unduplicated number of people served at Emergency Services | 3,081 |

| Mobile Crisis Unit | | | | | |
|-------------------|------------|------------|------------|-----------|
| - Total number of services (attempts and contacts) | 319 | 361 | 415 | 389 | 1,484 |
| - Total number of services (contacts) | 215 | 242 | 294 | 278 | 1,029 |
| - Services with law enforcement involvement or referral | 79 | 126 | 148 | 114 | 467 |
| Unduplicated number of people served (contacts) | 791 |

| Sheriff’s Office | | | | | |
|------------------|------------|------------|------------|-----------|
| - Emergency Custody Orders and Criminal Temporary Detention Orders (ECOs/CTDOs) from Jail | 3 | 13 | 9 | 10 | 35 |
| - Transports from MCRC to out of region mental health hospitals | 26 | 37 | 28 | 37 | 128 |
| - Jail transfers to Western State Hospital (behavioral health) | 5 | 2 | 6 | 10 | 23 |

| Crisis Intervention Training (CIT) | | | | | |
|-----------------------------------|------------|------------|------------|-----------|
| - Graduates (since June 2015) | | | | | 265 |
| - Dispatchers trained | | | | | 42 |

| Mental Health First Aid (MHFA) | | | | | |
|--------------------------------|------------|------------|------------|-----------|
| - Magistrates | | | | | 30 |
| - Sheriff’s deputies | | | | | 248 |

* Officer dispatched and provided services; no further action required.
** Jurisdictions include Fairfax County, Cities of Fairfax & Falls Church, Towns of Herndon & Vienna, George Mason University, Northern Virginia Community College, Virginia State Police
The Sheriff’s Office is proud to be at the forefront of creating Diversion First. Mental illness is not a crime and should not be treated as such. Jails were never designed to be psychiatric hospitals and shouldn’t be the default for those individuals in need. This is about human capital!

- Sheriff Stacey A. Kincaid

The Fire and Rescue Department is excited to be a partner in this Initiative. Diversion First puts the patient first!

- Fire Chief Richard R. Bowers, Jr.

Diversion First has helped hundreds of people over the past year get needed treatment and support for mental health and substance use disorders who might otherwise have been sent to jail. But our challenge is far from over. Individuals need a supportive community. We all do better when we all do better.

- Fairfax-Falls Church Community Services Board Director Tisha Deeghan

Through robust collaboration with our Diversion First stakeholders, we are providing training to all law enforcement personnel and mental health providers to deliver essential wellness services.

- Police Chief Colonel Edwin C. Roessler Jr.