

Diversion First Stakeholders Group Meeting

December 15, 2022

Welcome!

John C. Cook
Chairman, Diversion First
Stakeholders Group



Agenda

Welcome

Announcements and Updates

Featured Presentation

Specialty Dockets

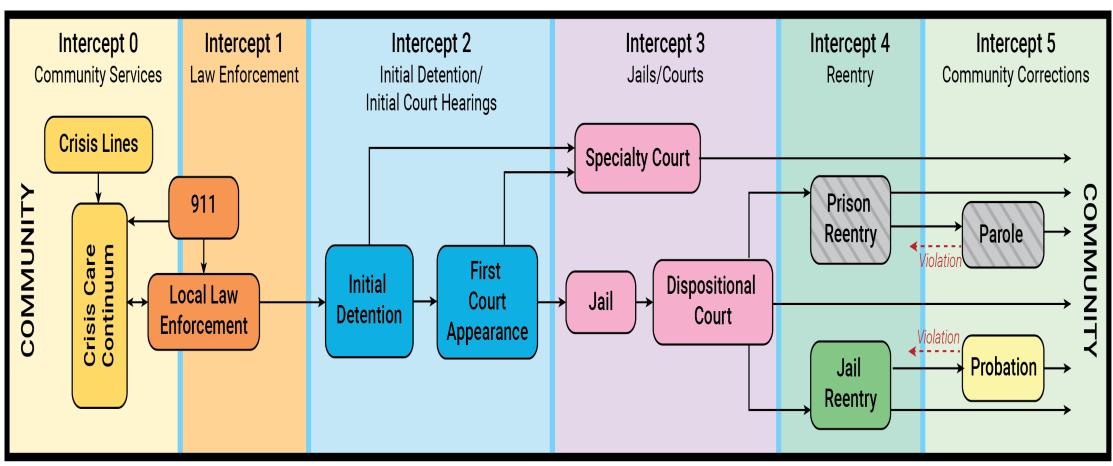
- Mental Health Docket
- Drug Court
- Veterans Treatment Docket

Breakout Groups

Brief Report Outs from Breakout Groups

Wrap Up

Sequential Intercept Model



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Announcements and Updates

- National Stepping Up Initiative
- Merrifield Crisis Response Center
- Community Response Team
 - Speaking at state and national conferences
 - Expanding to a second unit in 2023



- Medication for Opioid Use Disorder (MOUD) in the Adult Detention Center
- Behavioral Health Crisis Response System
 - 23-hour beds
 - Co-Responders



Co-Responder Program



CIT trained Fairfax County police officer and a CSB Clinician respond to 911 calls for service related to behavioral health

- First Team expanded to seven days a week (8/8/22)
- Second team added (8/22/22)
 - Currently three days a week; expanding to 7 days in early 2023
- Staffing for two more teams in progress
- As of December 11, over 600 responses in the community
- 30% diverted from potential arrest and/or hospitalization
- 55% of the calls were de-escalated in the field (no further action needed)
- Other outcomes include linkages to a higher level of care and/or community resources



Behavioral Health Crisis Response System

Long-Term Vision for Crisis Response

Someone to Talk to, Someone to Respond and a Place to Go



Long-Term Vision for Interconnectivity

Regional & Local Services + Public Safety = Crisis Response System

Someone To Talk To

911
Regional Crisis Call Center
988

Someone To Respond

Public Safety/First
Responders
Regional Mobile Crisis
Response
Fairfax CSB Mobile Crisis
Fairfax Co-Responder

A Place To Go

Bulova Center

(formerly Merrifield
Center)

Development/expansion
of Crisis Facilities

(Crisis Stabilization Units
and 23-hour)



Draft Triage Plan for Calls Related to Behavioral Health

Appropriate for Diversion to Regional Crisis Call Center

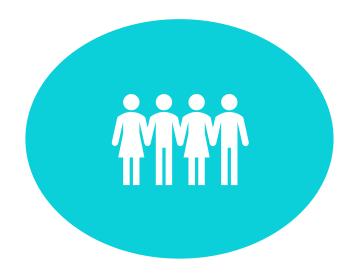
Appropriate for Response by
Co-Responder or
Public Safety with CSB Mobile Crisis

Routine Moderate Urgent Emergent

Next Steps



EXPAND REGIONAL AND LOCAL CRISIS SERVICES



SEEK AND INCORPORATE COMMUNITY INPUT



SUBMIT MARCUS
ALERT PLAN



Fairfax County Specialty Dockets

Martha McCue, Behavioral Health Manager
Brooke Dembert, Veterans Treatment Docket Coordinator
Michelle Cowherd, Mental Health Docket Coordinator

Why Treatment Courts?

Treatment courts are the single most successful criminal justice intervention for leading people living with substance use and mental health disorders out of the justice system and into lives of recovery and stability.

Cultural shift:

"Instead of viewing addiction as a moral failing, they view it as a disease. Instead of punishment, they offer treatment. Instead of indifference, they show compassion."

Fairfax County Specialty Dockets

Provide a continuum of evidence-based treatment and supervision services

Reduce	recidivism
Enhance	public safety
Reduce	amount of time from arrest or probation violation to entry into treatment
Promote	stability, quality of life and improved functional outcomes for participants

Rules of Supreme Court of Virginia

Virginia Rule 1:25 Specialty Dockets

- Drug Treatment Courts
- Veterans Treatment Dockets
- Behavioral/Mental Health Dockets
- Localities petition the Supreme Court of Virginia for authorization prior to beginning operation
- Financing is the responsibility of the locality and local court, but funds may be provided via state appropriation and federal grants
- Evaluation and reporting requirements to the Supreme Court Advisory Committee



Docket vs Court

- Drug Court is a court regulated by Virginia State Statue
- Vets Docket & MH Docket are dockets which are cases grouped together based on presentation of a common dynamic, underlying the legally cognizable behavior

Docket Mission Statements

DRUG COURT

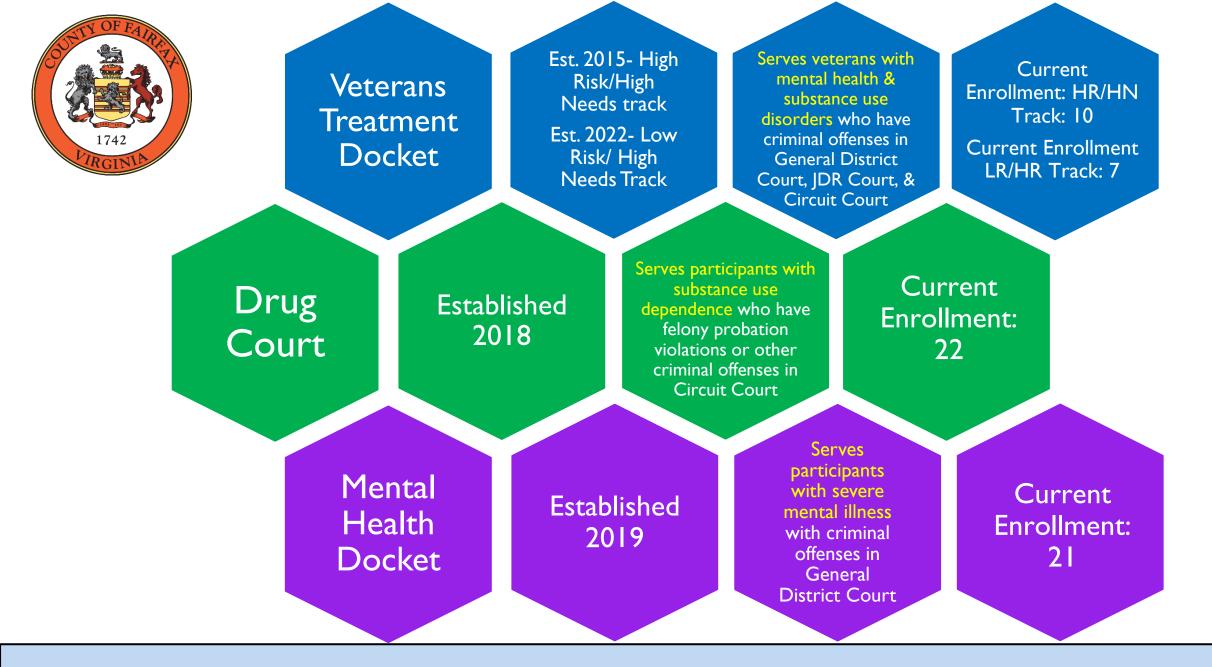
To enhance public safety by providing cost-effective, research-based interventions through an integrated system of treatment and judicial supervision that results in participant accountability, reduced recidivism and positive participant outcomes.

MENTAL HEALTH DOCKET

To enhance public safety by providing cost-effective, research-based interventions through an integrated system of treatment and judicial supervision that results in participant accountability, reduced recidivism and positive participant outcomes.

VETS DOCKET

To serve our justice-involved veterans and the community. The docket aims to return productive, law-abiding veterans to our community, reduce recidivism and improve public safety by providing individualized comprehensive treatment and supervision responsive to veterans' unique strengths, needs and culture.



FAIRFAX COUNTY'S SPECIALTY DOCKETS

DRUG COURT

Why Drug Courts?

Drug courts are the *single most successful* criminal justice intervention for seriously addicted offenders. Proven to *save lives, save money, and reduce crime,* these courts:

- ✓ Treat substance use disorders
- ✓ Treat mental health needs
- ✓ Deliver services for lifelong recovery
- ✓ Secure education, employment, and housing
- ✓ Produce tax-paying, productive citizens

- ✓ Break the cycle of addiction in families
- ✓ Reduce re-arrests and re-incarcerations
- ✓ Reduce substance use and overdose
- ✓ Reduce emergency room admissions
- ✓ Reduce foster care placements

DRUG COURT

- In 2016, Fairfax County Circuit Court conducted more than 637 probation violation hearings
 - Many of these were a result of positive drug tests and/or non-completion of substance use treatment
- Approved the State Supreme Court in 2018; Drug Court officially started in Dec 2018
- Accepts non-violent probation violations and other appropriate criminal charges under the jurisdiction of the Fairfax County Circuit Court
- Since 2018, 54 participants have entered the program with a total of 12 graduates

VETERANS DOCKET

Why Vets Docket?

- 76,000+ veterans reside in Fairfax county (U.S. Census bureau, 2018).
- A growing number of veterans suffer from substance use disorders, mental health conditions (such as PTSD), and trauma (such as traumatic brain injury).
- Currently, it is estimated that 22 veterans commit suicide a day.
- These issues can be exacerbated by the loss of structure and camaraderie found in the military, and research continues to link substance use disorders with service-related mental illness & trauma.
- Such conditions increase the likelihood of involvement with the justice system. 81% of justice-involved veterans had a substance use disorder prior to incarceration, and 25% were identified as having a mental illnessll.

1 in 5

1 in 6

50%

181,000

Veterans with symptoms of a mental health disorder or cognitive impairment Iraq and Afghanistan veterans suffering with a substance use disorder Percentage of veterans with PTSD that do not receive treatment Veterans incarcerated in United States jails or prisons

VETERANS DOCKET

- Fairfax Veterans Treatment Docket (VTD) program counts as 3 of the 7 existing
 Veterans Dockets in Virginia
- The Fairfax VTD program is comprised of 3 courts and includes 2 tracks
 - Low Risk/High Needs Track in the General District Court Docket & Juvenile and Domestic Relations Court Docket
 - High Risk/High Needs Track in the Circuit Court Docket
- Since 2015
 - 70 Veterans have entered the program
 - 63 in High Risk/High Needs Track & 7 in the Low Risk/Low Needs Track
 - 43 veterans have successfully graduated and 17 total active participants

MENTAL HEALTH DOCKET

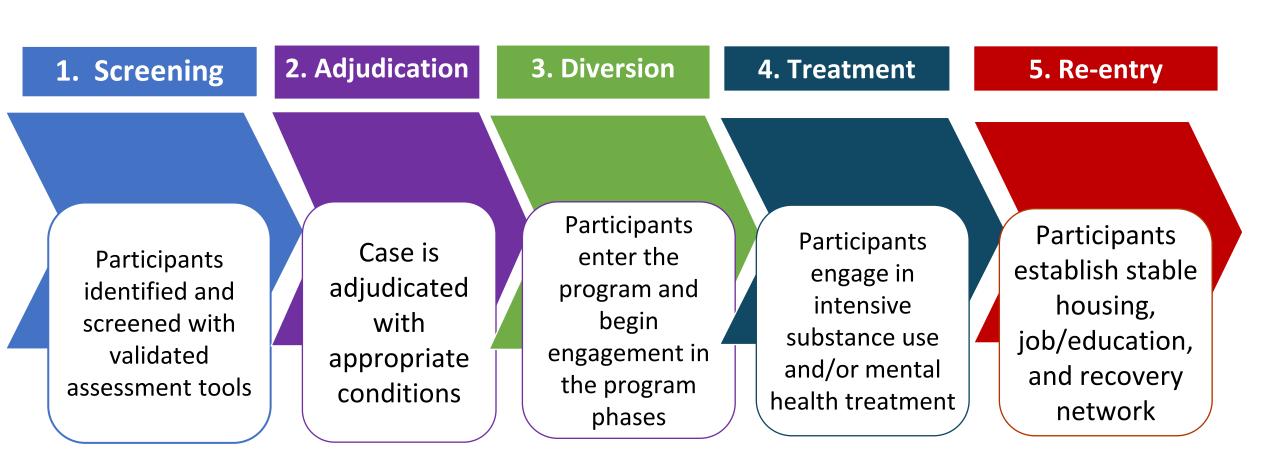
Why Mental Health Docket?

- Link chronically mentally ill individuals to treatment and resources to include: medication management, case management, permanent supportive housing, residential treatment individual and group therapy, and substance abuse treatment
- The Fairfax General District recognizes that approximately 33% of individuals with criminal charges have mental health or dual diagnoses that have contributed to the criminal charges
- It is the goal of the General District Court to provide these individuals with services at the earliest opportunity.
- In order to achieve that goal, the Mental Health Docket is casting the "widest net" possible
 to address all levels of mental health need and will be segmented to address these
 different levels of need

MENTAL HEALTH DOCKET

- Approved by Supreme Court in early 2019, and officially launched July 10, 2019
- Serves participants with severe mental illness in General District Court
- 76% of our participants have co-occurring substance use disorders along with their severe mental illness diagnoses
- Works closely with Victim Services Division of Fairfax County Police Dept; this
 partnership has allowed us to accept some violent charges that involve victims
- Since 2019, 46 participants have entered the program with a total of 20 graduates. Our next graduation is January 20, 2023, and we will have 4 graduates!

5 Major Components of Specialty Courts



Docket Team Members

Judge(s)

Presides over their respective docket in non-adversarial court appearances

Docket Coordinator

Oversees administrative duties, conducts quality assurance, maintains client data, coordinates services from each discipline, and oversees the overall delivery of quality clinical services.

Community Supervision/ Probation Officers

Responsible for monitoring participants' compliance, which includes drug testing, verification of community service hours and employment/residence.

Prosecutor

Negotiates veterans' entry and contract into docket and represents the interests of the Commonwealth Attorney's office throughout the veterans' docket process

Defense Attorney

Provides counsel and advocacy for the veteran's legal interests and due process rights

Treatment Coordinator/Providers

Clinical provider responsible for the initial assessment and Phase Treatment Plans, coordinates with the community treatment providers, and provides pertinent clinical updates to the docket team

Law Enforcement

Engages with justiceinvolved participants

Evaluator

Evaluates data measures to make sure program is meeting program outcome goals

Docket Hearing Schedule

Veterans Treatment Docket

Circuit Court 1st & 3rd Wednesdays

9-10 am in Courtroom 5H

GDC/J&DR 2nd & 4th Wednesdays

8:30-9:30 am in Courtroom 3K

Drug Court

Every Thursday from

9-10 am in Courtroom 4H

Mental Health Docket

1st, 3rd, & 5th Fridays

2-3 pm in Courtroom 1E

Specialty Docket Contact Information

Veterans Treatment Docket Coordinator

Brooke Dembert, LCSW

Brooke.Dembert@fairfaxcounty.gov

571-585-7415 cell

Courthouse Room 214

Drug Court Coordinator

Jennifer Fuller, LMHP-R

Jennifer.Fuller@fairfaxcounty.gov

571-567-1794 cell

Courthouse Room 316

Mental Heath Docket Coordinator

L. Michelle Cowherd, LCP

<u>Laura.Cowherd@fairfaxcounty.gov</u>

703-223-2124 cell

Courthouse Room 316

Breakout Groups

- Question #1- Based on what you heard tonight, what topics do you think are important to include in a Specialty Docket Stakeholders Group?
- Question #2- What do you think could contribute to the continued success of the dockets?
- Question #3- What are some of the potential challenges or barriers that could impact the success of the dockets moving forward?
- Breakout groups will convene for 15 minutes
- Each group will have a facilitator





THEMES FROM BREAKOUT SESSIONS

REPORT OUT

DIVERSION FIRST

Thank you!

DiversionFirst@fairfaxcounty.gov

Specialty Dockets

Supplemental Slides

	Docket Entry Process		
	Application/ Referral	Referral/Application submitted to Docket Coordinator- Referrals can be magistrates, law enforcement, pretrial staff, treatment providers, probation, judges, defense lawyers, participants themselves, etc.	
* = * = * = * =	Docket Coordinator Eligibility Screen	Docket Coordinator conducts preliminary screening on legal, demographic program eligibility	
U g	Clinical & Risk Screening	If eligibility is met, risk assessment (RANT) and clinical screening are conducted with candidate	
<u>=</u>	Program Expectations	Docket Coordinator ensures participant has a full understanding of program expectations	
Photo I	Legal Review/ Contract	Commonwealth Attorney reviews case and confers with Defense Attorney to create the Participant Contract	
	Official Entry in docket	Participant Contract is signed and the participant officially enters docket	

Program Structure Based on NADCP Standards

Vets Docket & Drug Court High Risk/High Needs

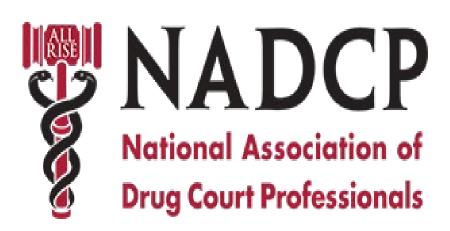
• 5 phases, minimum of 14 months to complete.

Vets Docket Low Risk/High Needs

• 4 phases; minimum 11 months to complete

MH Docket

• 3 phases; minimum 12 months complete



- Phase advancement- based on achievement of objectives for each phase; participants must complete all phases to graduate.
- Compliance is monitored by the probation officer (randomized drug testing and compliance with treatment and phase requirements)
- Incentives, rewards, sanctions, and therapeutic responses are used to promote behavior change through the phases.

Drug Court Eligibility

Legal Eligibility

 Non-violent probation violations and other appropriate criminal charges under the jurisdiction of the Fairfax County Circuit Court

Demographic

- Resident of Fairfax County
- Eligible to receive behavioral health services through Fairfax-Falls Church Community Service Board and/or private insurance

Treatment

- Meets the DSM-5 criteria for alcohol and/or substance dependence disorder (moderate to severe)
- Scores high criminogenic risk and high treatment needs (HR/HN) on the Risk and Needs Triage (RANT) assessment tool
- Must have identified substance use treatment needs that can be met by the program and a willingness to engage in the services provided.

Veterans Docket Eligibility



Legal Eligibility

- Criminal charge under the jurisdiction of the Fairfax County General District Court, Circuit Court or Juvenile Domestic & Relations Court
- Discharged from any branch of the United States Military, the Reserves, or the National Guard

Demographic

- Can reside outside of Fairfax County, as long as distance to VTD requirements is reasonable and does not pose barrier to participation
- Eligible to receive behavioral health services through the Dept. of Veterans Affairs, Fairfax-Falls Church Community Service Board or private insurance

Treatment

- Meets the DSM-5 criteria for a major mental health and/or substance use disorder
- Scores high criminogenic risk and high treatment needs (HR/HN) OR low criminogenic risk and high treatment needs (LR/HN) on the Risk and Needs Triage (RANT) assessment tool
- Must have identified treatment needs that can be met by the program and a willingness to engage in the services provided.

Mental Health Docket Eligibility

Legal Eligibility

- Must have a criminal charge that is under the jurisdiction of the Fairfax County General District Court
- Misdemeanor or felony level offenses are accepted with prosecutorial consent
- There must be a link between the behavior which led to criminal charges and symptoms of diagnosed mental illness

Demographic

- 18 years or older
- Resident of Fairfax County
- Eligible to receive behavioral health services through Fairfax-Falls Church Community Service Board and/or private insurance

Treatment

- Diagnosis of a severe mental illness as outlined by DSM-5
- Scores high criminogenic risk and high treatment needs (HR/HN) on the Risk and Needs Triage (RANT) assessment tool
- Must have identified treatment needs that can be met by the program and a willingness to engage in the services provided.

Exclusionary Criteria

Exclusionary criteria is not necessarily automatic, but **could** include

- Violent criminal history
- Sex offenses
- Unresolved felony or jailable misdemeanor offenses in other jurisdictions
- Lack of cognitive ability to have meaningful participation in docket requirements

Vets Docket

Dishonorable discharge from any branch of the United States Military

Drug Court:

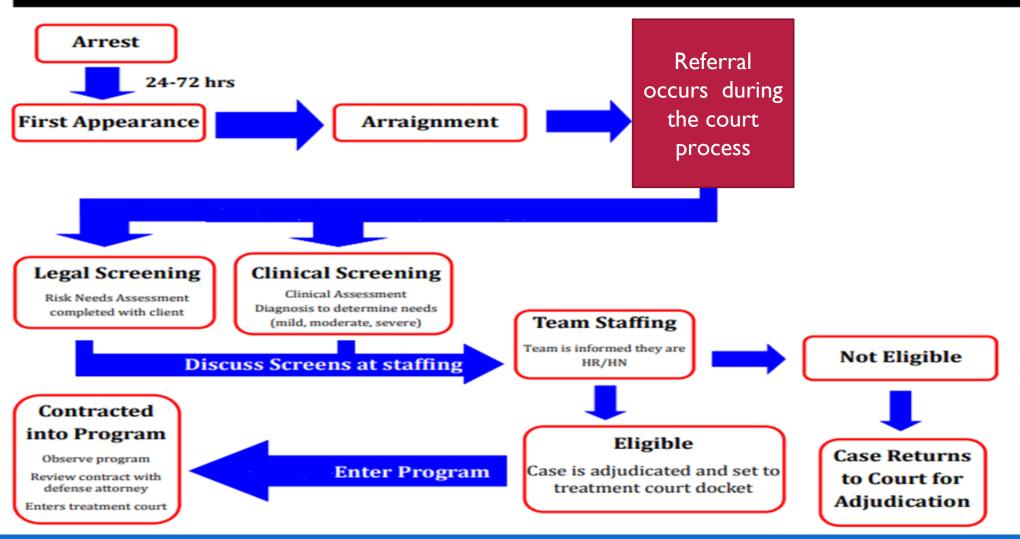
• Violent felonies as defined in (17.1-805 or 19.2—297.1) within the last 10 years

MH Docket

- No outlined exclusionary charges if there are victims involved, victims must be supportive of the client participating in the docket
- If they are found incompetent, they may still participant once their competency is restored

Component 1: Screening

REFERRAL FLOW CHART ARREST TO ENTRY



Screening (continued)

- Participants are identified and assessed for VTD using the *Risk and Needs Triage(RANT)* assessment which is a validated risk-needs assessment tool that has been demonstrated empirically to assess criminogenic risk and treatment needs
- All 3 specialty courts serve high criminogenic risk and high treatment need (HR/HN); Only the Vets Docket has a has a low criminogenic risk/high treatment need (LR/HN) track which was established in July 2022
- Candidates are also screened with a validated clinical-assessment tool that evaluates the formal diagnostic symptoms of substance dependence and/or mental health diagnosis by qualified mental health professional to determine treatment eligibility and needs

Component 2: Adjudication

Drug Court operates as a Deferred Disposition Model

• Disposition is deferred until successful completion of the Drug Court program

MH Docket & Vets Docket operates as a Pre & Post Sentence Model

• The plea agreement/sentence is either determined prior to entry by the candidate's defense attorney and Assistant Commonwealth's Attorney

or

Disposition is deferred until successful completion of the program

Legal Incentive

- Because the dockets include misdemeanor and felony charges, the legal incentive to enter the program is individualized to each candidate
- Successful completion of program could include, but is not limited to deferred disposition, reduction of charges, suspended jail time, and/or dismissal of charges.

Component 3: Diversion

Phase 1: Acute Stabilization (min. 60 days) Phase 2: Clinical Stabilization (min. 90 days) Phase 3: Pro-Social Habilitation (min. 90 days) Phase 4: Adaptive Habilitation (min. 90 days) Phase 5: Continuing Care (min. 90 days)

Component 3: Treatment

Phase 1: Acute Stabilization (min. 60 days)

 Initial enrollment in substance use and/or mental health treatment services, development of Phase Treatment Plan, case management services, randomized drug testing, community supervision visits, and judicial supervision.

Phase 2: Clinical Stabilization (min. 90 days)

Continued engagement in Phase Treatment Plan and appropriate services, with increased focus on stabilizing basic needs. This includes addressing housing, medical and financial needs through veteran specific agencies

Phase 3: Pro-Social Habilitation (min. 90 days)

Continued engagement in Phase Treatment Plan & appropriate services, with increased focus on stabilizing basic needs. Includes addressing housing, medical, financial needs through veteran agencies

Phase 4: Adaptive Habilitation (min. 90 days)

Continued engagement in Phase Treatment Plan and appropriate services, with increased focus on creating meaningful daily structure including engagement in vocational, education and employment services, community service and/or prosocial activities

Phase 5: Continuing Care (min. 90 days)

Continued engagement in Phase Treatment Plan and appropriate services, with focus on development of an After-Care plan to make sure the veteran has a sustainable community transition plan when they graduate from the docket

Component 4: Treatment

Participants' behavioral health needs are assessed at entry to address treatment needs

Treatment Entities/Providers

Drug Court & MH Docket Participants:

 Fairfax-Falls Church CSB and/or providers through private insurance

Vets Docket Participants:

- Department of Veterans Affairs Medical Centers
- Fairfax-Falls Church (CSB) or providers through private Insurance

Treatment entities/providers offer a continuum of evidence-based services, including individual and group therapy, psychiatric services, medication management, residential treatment, supervised/re-entry living programs, and recovery support.

American Society of Addiction Medicine (ASAM) criteria used to determine level of care and placement setting.

Component 5: Re-Entry

The participant works with the treatment team to create a case management plan that addresses basic needs that pose barriers to treatment and improves independence and likelihood of success in community.



Housing

Employment/education goals

Financial needs

Enrollment in benefits

Engagement in prosocial activities

An After-Care plan is established prior to the participant transitioning out of the program

Program Conclusion

Graduation

- Completion of all phase and court ordered requirements
- Implementation of an aftercare plan approved by the Treatment & Supervision Team
- Completion of a graduation application and panel interview with treatment team

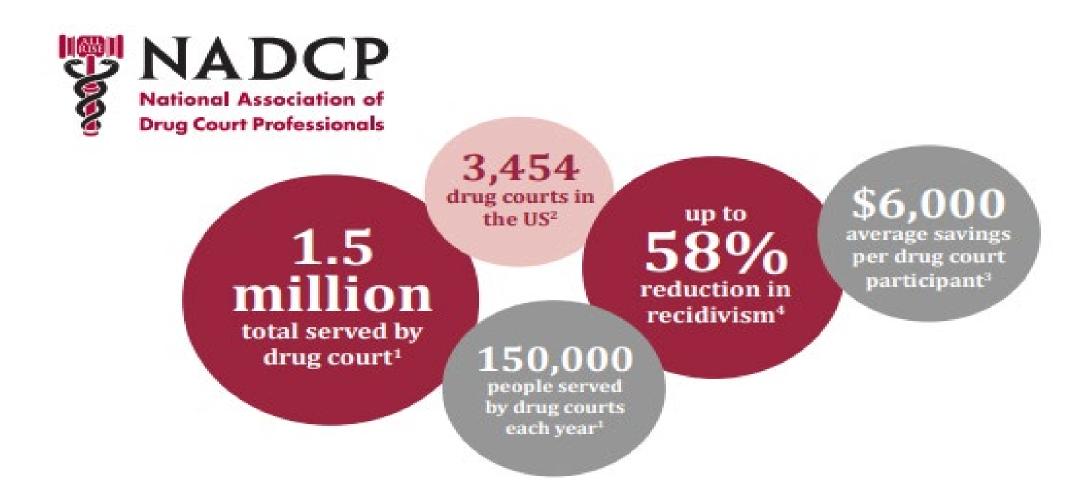
Opt-Out Provision

- Participant can voluntarily withdraw at any time.
- The case will be reinstated to their original sentencing judge to determine the appropriate disposition for not completing the program, as originally outlined in their sentencing agreement.

Termination

- Termination criteria is not necessarily automatic but may include: new arrests and/or convictions; sustained failure/inability to cooperate with treatment recommendations; violence towards staff or participants; absconding from docket.
- Terminated participants will return to their original sentencing judge for a ruling on the violation of conditions of their original sentence, which could result in receiving jail time that had been previously suspended.

Do Drug Courts Work?



American University School of Public Affairs Justice Programs Office (2016).

² National Drug Court Resource Center. https://ndcrc.org/database/ (retrieved March 5, 2019).

³ National Institute of Justice (2011). Multi-site Adult Drug Court Evaluation.

Do Veterans Treatment Courts Work?



The first major study of these courts, published in the *Community Mental Health Journal*, concluded:

Veterans participating in Veterans treatment courts experience significant improvement with depression, PTSD, and substance use, as well as with critical social issues such as housing, emotional health, relationships and social connection, and overall functioning and well-being.



The same study found that

89.5% of veterans with PTSD who participated in veterans treatment court **remained arrest-free** during their time in the program.

It further concluded that mentoring from fellow veterans was particularly effective: veterans who received mentoring experienced better clinical outcomes and felt more socially connected.



More research on this relatively young court model is forthcoming, and early data are overwhelmingly positive.

Drug Court Team

Judges

 Honorable Dontae' L. Bugg (Alternate- Stephen C. Shannon)

Docket Coordinator/Clinical Supervisor

 Jennifer Fuller, LMHP-R, Community Services Board

Treatment Coordinator

Joya Lee, LCSW, Community Services Board

Commonwealth Attorney's office

Kelsey Gill

Office of the Public Defender

Negin Farahmand-Wood & Jessica Newton

State Probation Officer- District 29

Yvonne Lorenc

Fairfax County Sheriff's Office

Capt. Justin Sherwood

Evaluator

Lisa Lunghofer

Veterans Docket Team

Judges

- Circuit Court- Honorable Grace Carroll (Alternates-Hon. Penney Azcarate & Stephen Shannon)
- General District Court- Honorable Susan Earman (Alternates- Hon. Michael Lindner & Hon. Michael Holleran)
- JDR- Honorable Jonathan Frieden (Alternate- Hon. Todd Petit)

Docket Coordinator/Clinical Supervisor

• Brooke Dembert, LCSW, Community Services Board

Commonwealth Attorney's Office

Sean O'Brien & Whitney Gregory

Office of the Public Defender

Amy Jordan & Negin Farahmand Wood

Community Supervision Probation Officers

Michael Watkins (District 29 P&P), Chevonne Robinson
 & Gregory Washington (JDR Court Services)

Treatment Coordinator

Jamie Hurd, LPC, NCC; Community Services Board

Fairfax County Sheriff's Office

First Lieutenant Derrick Ledford

US Dept of Veteran Affairs & Virginia Dept of Veterans Services

 Elysia Flancher & Karen Carrington (US Dept of Veterans Affairs) & Kevin McNelis (VA Dept of Veterans Services)

Mentor Coordinator

Don Sutherland

Evaluator- Lisa Lunghofer

VETERANS DOCKET

VET DOCKET SPECIFIC ROLES

Mentor Coordinator

Responsible for recruiting, training, supervising, and coordinating veteran mentors

Veterans Justice Outreach Specialist

Employed through the
Department of Veterans Affairs
and responsible for enrollment in
VA benefits and providing timely
access to VA services

Veteran Justice Specialist

employed by Virginia Department of Veteran Services and responsible for connection of veteran specific services including resources for basic needs/benefits

Mental Health Docket Team

Judges

 Honorable Tina L. Snee (Alternates- Susan J. Stoney & Todd Zinicola)

Docket Coordinator/Clinical Supervisor

Michelle Cowherd, LPC, Community Services Board

Treatment Coordinator

 Lacy Jordan White, LCSW, Community Services Board

Commonwealth Attorney's office

 Christian Fernandez, Christopher Collins, Christopher Worthington

Office of the Public Defender

Negin Farahmand Wood & Robert Pomeroy

Community Probation Officers

 Jose Alvarado Martinez, Shon Burrell, Shameka Smith, Joskamery Tavarez

Evaluator

Lisa Lunghofer