Collaborating to Deliver Results

MAYOR'S TASK FORCE ON BEHAVIORAL HEALTH AND THE CRIMINAL JUSTICE SYSTEM

PARTNER AGENCIES & OFFICES

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Mayor's Office of Criminal Justice In December 2014, the de Blasio administration released the action plan developed by the Mayor's Task Force on Behavioral Health and the Criminal Justice System (Task Force). The action plan outlines a comprehensive blueprint to continue to drive down crime while also reducing the number of people with behavioral health issues who cycle through the criminal justice system.

The recommendations of the Task Force focus on ensuring that, when appropriate, individuals with behavioral health disorders:

- Do not enter the criminal justice system in the first place;
- If they do enter, that they are treated outside of a jail setting;
- If they are in jail, that they receive treatment that is therapeutic rather than punitive in approach; and
- Upon release, they are connected to effective services.

The Task Force worked to ensure that the City establish the systems to address appropriately the risks and needs this population presents. Over 100 days, the Task Force developed 24 interlocking public health and public safety strategies that address each point in the criminal justice system and the overlap among those points. Recognizing the interdependent nature of the behavioral health and criminal justice systems, the Task Force identified five major points of contact: on the street, from arrest through disposition, inside jail, during release and reentry, and back in the community. The comprehensive strategy developed by the Task Force is backed by evidence and informed by widespread expertise. This action plan is supported by an unprecedented \$130 million investment, of which \$40 million is asset forfeiture funds contributed by the District Attorney of Manhattan. The plan is a key component of the Mayor's commitment to reduce unnecessary arrests and incarceration, direct criminal justice system fairer.

Led by the Mayor's Office of Criminal Justice (MOCJ), the Mayor's Task Force on Behavioral Health and the Criminal Justice System continues to work closely with the New York City Department of Health and Mental Hygiene (DOHMH), the New York City Police Department (NYPD), the Department of Correction (DOC), NYC Health + Hospitals, the Department of Probation (DOP) and the Human Resources Administration (HRA). Highlights of the Task Force's accomplishments in the first four months of Fiscal 2017 include:

NYPD expanded the Crisis Intervention Training, which NYPD developed for police officers to enable them to better recognize the behaviors and symptoms of mental illness and substance use. The training — which includes role playing, briefings on relevant mental health laws and conversations with individuals with mental illness who have had police encounters in the past — is being integrated into the police academy curriculum. 671 officers from over 80 precincts, as well as transit officers stationed in Northern Manhattan, completed training for Crisis Intervention Teams (CIT) in this reporting period. CIT has been incorporated into the NYPD Training Academy for new recruits and into ongoing trainings for seasoned patrol officers.

- The Pre-Arraignment Screening Unit (PASU) provided 3,847 individuals with enhanced behavioral health screening at arraignments in Manhattan Criminal Court during the reporting period. As part of the PASU, nurse practitioners and other health professionals piloted a process to identify those with immediate behavioral health needs, and connect them to providers for care and potential diversion. The initiative began as a pilot operating Monday through Friday from 6am to 2pm and has served nearly 11,000 individuals. In November 2017, it will expand to operate 24/7 at Manhattan Criminal Court.
- In August 2016, NYC Health + Hospitals opened the fourth specialized Program to Accelerate Clinical Effectiveness (PACE) unit to provide services to inmates with behavioral health issues. These intensive-care mental health units have served nearly 70 unique individuals during the reporting period. The City will add and staff eight more PACE units on Rikers Island by Fiscal 2020 to further support the City's overhaul of mental health care for inmates in City jails.
- Substance use disorder services at discharge have also been expanded to provide an additional 4,000 individuals annually with referrals to treatment and other essential services upon release from jail by the end of Fiscal 2017. In the reporting period, the substance use program served 1,017 individuals leaving Rikers, in addition to 2,246 people in Fiscal 2016.

In addition to the Task Force's accomplishments in the first four months of Fiscal 2017, the initiative has been focused on:

EXPANDING OPTIONS FOR POLICE

Achieving the Task Force's goals begins on the streets, where police and other first responders encounter those with behavioral health issues. In order to measure the impact of the Crisis Intervention Training, MOCJ and NYPD are developing a plan to evaluate the effectiveness of CIT. The evaluation will aim to look at changes in factors such as the number of arrests, incidents requiring assistance from Emergency Service Units and use of force incidents at the precincts where officers have been trained. According to CIT advisory board meetings, officers trained in CIT have widely reported a greater comfort in handling situations where a person appears to be having a behavioral health crisis, and members of the community have begun to recognize the CIT logo and what it represents.

CUTTING CASE PROCESSING TIMES

On April 14, 2015, the Mayor and New York State Chief Judge Jonathan Lippman announced Justice Reboot, an initiative to modernize New York City's criminal justice system so it is fairer and more efficient. Central to this first round of reforms has been a robust strategy to reduce case processing times significantly, a goal of the Behavioral Health Task Force.

When MOCJ first began Justice Reboot, 1,427 cases with detained defendants were pending for more than one year. As of October 31, 2016, the most recent data available from the Office of Court Administration (OCA), 1,302 (91%) of those cases have now been resolved. A total of 74 cases were resolved during this reporting period. Since the start of the initiative, MOCJ, OCA, the five District Attorneys and Defense Bar have been meeting regularly as a Coordinating Committee to review progress toward goals and make implementation decisions based on the recommendations of borough-specific teams. Additionally, in order to provide transparency and real-time information on case processing times citywide, the City is building an online tracking tool. This tool will allow each part of the criminal justice system to assess specific causes of delay in individual cases, track borough-specific case processing timelines alongside volume and resource availability, prepare status reports to pinpoint bottlenecks and help the Coordinating Committee develop solutions and ensure progress implementing them.

DECREASING VIOLENCE ON RIKERS ISLAND

DOC has adapted the CIT model — originally designed to improve the way police officers respond to mental health crises — to correctional settings. Crisis Intervention Teams comprise both DOC officers and NYC Health + Hospitals (H+H) staff specially trained in de-escalation and symptom identification. CIT trainings include site visits to mental health facilities that care for inmates who need additional support off of Rikers Island. As of October 31, 2016, a total of 351 staff (260 correctional and 91 health staff) have been trained; 93 were trained in the first four months of Fiscal 2017.

Staff trained in crisis intervention techniques have been able to successfully de-escalate situations without officially dispatching a Crisis Intervention Team. MOCJ, H+H and DOC have begun evaluating the program to measure the effect that the CIT training has on incidents of violence and use of force in units with CIT-trained staff. Since implementation in June 2015, the number of times officers in these facilities have used force has decreased by 43%.

DOC has also instituted Mental Health First Aid (MHFA) training to help officers work with inmates experiencing mental health issues and de-escalate situations. All recruits receive MHFA training, and DOC has also implemented eight additional in-service training hours for all officers. As of October 31, 2016, 2,449 officers have been trained.

INCREASING ACCESS TO SUPPORTIVE, PERMANENT HOUSING

Because many people with mental health and substance use issues cycle between homelessness and incarceration for months or years at great public expense and with tragic human outcomes, DOHMH added 120 permanent supportive housing slots dedicated to justice-involved individuals to its portfolio in Fiscal 2016. MOCJ generated a list of frequent users of the shelter and corrections systems over the past four years in an effort to connect that population to these housing beds. DOHMH has contracted with three service providers (Fortune Society, CAMBA and Urban Pathways) who receive names generated from the list, find the individuals, assess them for a probable mental illness or substance use disorder, and offer them this housing option. In the reporting period, an additional 20 individuals received both housing and support services through this initiative, for a cumulative total of 85 people placed into supportive housing. The Task Force continues to work on identifying and securing affordable scattered-site apartments in order to bring the program to capacity.

PERFORMANCE INDICATORS	ACTUAL FY16	4-MONTH ACTUAL (JULY - OCT) FY17	TARGET		CUMULATIVE		
			FY17	FY18	Actual	Target	End Date
NYPD officers who completed crisis intervention training ¹	3,947	671	*	*	4,618	5,500	6/30/2018
Participants enrolled in supervised release slots ²	911	1,014	*	*	1,925	3,048	6/30/2018
Individuals provided substance use disorder treat- ment services	2,246	1,017	*	*	3,263	4,000	6/30/2017
Individuals placed in DOHMH permanent sup- portive housing slots	65	20	Û	Û	85	267	TBD

NOTEWORTHY CHANGES, ADDITIONS AND DELETIONS

• The indicator "DOHMH permanent supportive housing slots" has been renamed "Individuals placed in DOHMH permanent supportive housing slots" for accuracy and clarity.

ADDITIONAL RESOURCES

For additional information go to:

- Behavioral Health and Criminal Justice Website: <u>http://www1.nyc.gov/site/criminaljustice/work/bhtf.page</u>
- Mayor's Task Force on Behavioral Health and the Criminal Justice System's Action Plan, December 2014: http://www1.nyc.gov/assets/criminaljustice/downloads/pdf/annual-report-complete.pdf
- Mayor's Task Force on Behavioral Health and the Criminal Justice System, First Status Report, July 2015: http://www1.nyc.gov/assets/criminaljustice/downloads/pdfs/BHTF_StatusReport.pdf