ST. CLAIR COUNTY COMMUNITY MENTAL HEALTH AUTHORITY

BOARD POLICY

Date Issued 3/2324

Page 1

CHAPTER		CHAPTER	SECTION	SUBJECT	
Service Delivery		03	001	0085	
SECTION	SUBJI				Ī
Treatment	Jail D		Diversion and Juvenile Diversionary Activity		
WRITTEN BY	REVISED BY		AUTI	AUTHORIZED BY	
John Sharkey	Latina K. Cates Joy Vittone SCCCMHA Board		MHA Board		

APPLICATION: I.

\times	SCCCMHA	Board
----------	---------	-------

SCCCMHA Providers & Subcontractors

Direct Operated Programs

Community Agency Con Residential Programs
Specialized Foster Care Community Agency Contractors

II. **POLICY STATEMENT:**

It shall be the policy of St. Clair County Community Mental Health Authority (SCCCMHA), by delegation from Region 10 Prepaid Inpatient Health Plan (PIHP), shall to ensure compliance to the Michigan Department of Health and Human Services (MDHHS) 'Jail Diversion Practice Guideline' by ensuring jail diversion and juvenile diversionary services activity are available, when appropriate, to individuals persons who have a serious mental illness, serious emotional disturbance, or intellectual disability, including individuals with a -co-occurring substance use disorder, and/or intellectualdevelopmental disability, as an alternative to prevent incarceration for alleged being charged with a misdemeanors or non-violent felonies. y Jail diversion for adults shall occur in compliance with the Michigan Department of Health and Human Services (MDHHS) Adult Jail Diversion Policy Practice Guideline. Juvenile diversionary activity shall occur with cooperation among SCCCMHA, local juvenile court systems, and local law enforcement as provided for under the Juvenile Diversion Act, 1988 PA 13 or other provisions of the juvenile justice system, and incarcerated in the county jail or municipal facility.

DEFINITIONS: III.

- Arraignment: The stage in the court process where the adult is formally charged and enters a plea Α. of guilty or not guilty.
- Booking: The stage in the law enforcement custody process following arrest, when processed for B. formal admission to jail.
- Co-Occurring Disorder: A dual diagnosis of a mental health disorder and a substance use disorder.
- Covered Adult: Non-minor individual with a serious mental illness or intellectual disability. including any individual with a co-occurring substance use disorder and/or developmental disability.

Formatted: Not Expanded by / Condensed by

Formatted: Font: 12 pt

Formatted: Indent: Left: 1.46", Hanging: 0.25", No bullets or numbering, Tab stops: Not at 0.96" + 0.96"

Formatted: Underline

Formatted: Right: 0.04"

Formatted: Font: 12 pt

Formatted: Font: 12 pt

Formatted: Font: 12 pt

Formatted: Indent: Left: 1.46", Hanging: 0.25", Right: 0", No bullets or numbering, Tab stops: Not at 0.96" +

- C.E. Covered Juvenile: Minor with serious emotional disturbance or intellectual disability, including any minor individual with a co-occurring substance use disorder and/or developmental disability.
- F. <u>Disposition (juveniles only)</u>: The orders of the Court given following the adjudication of a minor or at the time of a minor's review hearing.
- D.G. Diversion Training: Cross training of law enforcement, court, substance use and mental health personnel on the diversion system and how to recognize and treat individuals exhibiting behavior warranting jail diversion intervention or juvenile diversionary activity.
- E.H. In-Jail Services: Programs and activities provided in the jail to address the needs of Covered_Adults.people with serious mental illness, including those with a co-occurring substance use disorder, or an intellectual developmental disability. These programs or activities vary across the state and may include crisis intervention, screening, assessment, diagnosis, evaluation, case management, psychiatric consultation, treatment, medication monitoring, therapy, education and training. Services delivered are based on formal or informal agreements with the justice system.

Formatted: Underline

Formatted: Right: 0.04"

Formatted: Font: 12 pt

Formatted: Indent: Left: 1.46", Hanging: 0.25", Right: 0", Space Before: 0 pt, No bullets or numbering, Tab stops: Not at 0.96" + 0.96"

Formatted: Right: 0.1", Space Before: 3.5 pt

Formatted: Font: 12 pt

- F. <u>Jail Diversion Training</u>: Cross training of law enforcement, court, substance use and mental health-personnel on the diversion system and how to recognize and treat individuals exhibiting behavior-warranting jail diversion intervention.
- G. Jail Diversion: The process that diverts Covered Adults individuals with serious mental illness (and often co-occurring substance use disorder) or Intellectual/Development Disabilities (I/DD) who are in contact with the justice system from custody and/or jail and provides linkages to community-based treatment and support services. When appropriate, the individual avoids or spends a significantly reduced time period in jail and/or lockups on the current charge. Depending on the point of contact with the justice system at which diversion occurs, the process may be either a pre-booking or post-booking diversion process. Jail diversion processes are intended for individuals alleged to have committed misdemeanors or certain, usually non-violent, felonies, and who voluntarily agree to participate in the diversion process.

<u>I.</u>

- Juvenile Diversionary Activity: Activity provided that is intended to divert Covered Juveniles youth with serious emotional disturbance (SED), Intellectual/Development Disabilities (I/DD) and/or substance use disorders from any involvement or into less intensive involvement with the juvenile justice system. Comparable to Jail Diversion for Covered Adults.
- H.K. Minor: Individual under the age of 18 years.
- H.L. Post-booking Diversion: Diversion occurs after a the Covered Adultindividual has been booked and is in jail, out on bond, or in court for arraignment. Often located in local jails or arraignment courts, post-booking jail staff work with stakeholders such as prosecutors, attorneys, community corrections, parole and probation officers, mental health court staff, community-based mental health and substance use providers and the courts to develop and implement a plan that will produce a disposition outside the jail. The Covered individual is then linked to an appropriate array of community-based mental health and substance use treatment services. Note: the booking process applies only to the adult system.
- J.M. Pre-booking Diversion: Diversion occurs at the point of a Covered the iAdultadividual's contact with law enforcement officers before formal charges are brought and relies heavily on effective interactions between law enforcement officers and community mental health, Mobile Crisis Unit, and substance use services. SCCCMHA has designated the Mobile Crisis Unit Team to provide assistance with pre-booking options. The individual is then linked to an appropriate array of community-based mental health and substance use treatment services as an alternative to incarceration. Note: the booking process applies only to the adult system.
- K.N. Screening: For purposes of this policy, screening means evaluating a person involved with the criminal justice system to determine whether the person may be a Covered Adult or Covered Juvenile have a serious mental illness, serious emotional disturbance, co occurring substance use disorder, or an intellectual/developmental disability, and would benefit from a more comprehensive mental health evaluation and possible mental health services and supports in accordance with established standards and local jail diversion agreements.

...<u>STANDARDS:</u>

IV

A. Each CMHSP shall comply with Section 207 of the Mental Health Code (Act 258 of the Public Acts of 1974 as amended) which requires all CMHSPs to provide services designed to divert persons with serious mental illness, serious emotional disturbance, or intellectual/developmental disability from possible jail incarceration when appropriate. Such services are to be consistent

Formatted: Font: Not Bold

Formatted: List Paragraph, Indent: Left: 0.58", Hanging: 0.38", Right: 0.09", Space Before: 0.05 pt, Numbered + Level: 2 + Numbering Style: A, B, C, ... + Start at: 1 + Alignment: Left + Aligned at: 0.58" + Indent at: 0.96", Tab stops: 0.96", Left + 0.96", Left

Formatted: No underline

Formatted: Right, Indent: Left: 0.96", No bullets or numbering

Formatted: Right, Indent: Left: 0.96", No bullets or numbering

Formatted: Underline

Formatted: Indent: Hanging: 0.34"

Formatted: Left, Space Before: 0.1 pt

Formatted: Heading 2, Left, Numbered + Level: 1 + Numbering Style: I, II, III, ... + Start at: 1 + Alignment: Left + Aligned at: 0.08" + Indent at: 0.58", Tab stops: 0.58", Left + 0.58", Left

with policy established by the PIHP and MDHHS.

- A. SCCCMHA shall provide services designed to divert Covered Adults and Covered Juveniles from possible jail incarceration, when appropriate. Such services shall be consistent with policy and guidelines established by the PIHP and MDHHS, and codified in Section 207 of the Mental Health Code (Act 258 of the Public Acts of 1974 as amended).
- B. Region 10 shall-manages and provides oversight to the jail diversion process for the provider network in accordance with the terms of its MDHHS/PIHP contract and delegates program-level implementation to SCCCMHA. At the service level, however, Region 10 shall consider jail diversion as a program level delegation, to each CMHSPSCCCMHA as part of Region-10/CMH contract service provision requirements. As such, each affiliate CMHSP-shall provide jail diversion activities in accordance with the PIHP/SCCCMHA contract, and this Policy-guideline and in accordance with MDHHS Jail Diversion Practice Guideline.
- C. Offenses considered appropriate for jail diversion and juvenile diversionary activity shall be negotiated at the local level between <u>SCCCMHAeach CMH</u> and their respective law enforcement agencies.
- D. Eligibility for jail diversion services and juvenile diversionary activity shall be restricted to those individuals suspected of having a serious mental illness, a co-occurring substance use disorder, serious emotional disturbance, or an intellectual developmental disabilityCovered Adults and Covered Juveniles who: Additionally, the jail diversion process shall be intended for individuals:
 - 1. Are Aalleged to have committed misdemeanors or certain, usually non-violent felonies; and
 - 2. Who vVoluntarily agree to participate in the diversion.
- E. SCCCMHA shall support inter-agency collaboration for effective Juvenile Diversionary
 Activities for Covered Juveniles and maintain interaction among behavioral health, law
 enforcement, and juvenile justice systems. Diversion training and collaborative meetings
 shall be held to exchange information and address/support ongoing diversion efforts, in line
 with MDHHS juvenile diversionary guidance as it is issued. Note: MDHHS is developing a
 formal policy practice guideline to address juvenile diversion which shall be reviewed for
 inclusion into this Policy and Procedures when issued by MDHHS.
- E.F. SCCCMHA Each CMH-shall have a uniquely identifiable jail diversion process for Covered Adults, which has a pre-booking component, and a post-booking component. SCCCMHA shall The CMH jail diversion is detailed below:

1. Overall Jail Diversion Requirements:

- 1. Restrict eligibility to individuals who have or are suspected of having a serious mentalillness, including those with a co-occurring substance use disorder, and/or an intellectualdevelopmental disability, Covered Adults who have committed a minor or serious offense_ that would likely lead to an arrest or /charge or who have been arrested or charged, or who have been removed from a situation that could potentially lead to an arrest or /charge.
- 2. Have a pre-booking diversion mechanism or process that clearly describes the means by which an individual is identified at some point in the arrest process and diverted into mental health services. Specific pathways in the pre-booking jail diversion shall be described in an inter-agency agreement for diversion.
- 3. Coordinate with and support an inter-agency post-booking mechanism or process to evaluate jail detainees within the first 24 to 48 hours of detention to determine if they are Covered Adults. Specific pathways in the post-booking jail diversion process shall

Formatted: Right, Indent: Left: 0.96", No bullets or numbering

Formatted: Indent: Left: 1.25", Tab stops: Not at 1.21"

Formatted: Right, Indent: Left: 0.96", No bullets or numbering

Formatted: Font: 12 pt

Formatted: Font: 12 pt

Formatted: Indent: Left: 1.25", Tab stops: Not at 1.46"

Formatted: Indent: Left: 1.25", Hanging: 0.25", Tab stops: 1.46", Left

Formatted: Indent: Left: 1.25", Tab stops: Not at 1.46"

Formatted: Font: 12 pt

Formatted: Indent: Left: 1.25", Hanging: 0.25", Right: 0", Space Before: 0 pt, No bullets or numbering

Formatted: Indent: Left: 1.25", Tab stops: Not at 1.46"

be described in an inter-agency agreement for diversion. The process shall include:

- a. Evaluating eligibility;
- b. Obtaining necessary approval for diversion; and
- c. Linking eligible jail detainees to the array of community based mental health and substance use services available.
- 4. Assign specific staff to the pre-booking and post-booking components to serve as liaisons to bridge the gap between mental health, substance use, and criminal justice systems, and to manage interactions between these systems. SCCCMHA shall endeavor to have a strong leader with good communication skills and understanding of the systems involved and the informal networks needed to put the necessary systems in place.
- 5. Outline the jail diversion and related processes in a written inter-agency agreement with every law enforcement agency in SCCCMHA's designated service area, or if an Agreement is not yet finalized, then document its efforts to establish an interagency agreement.

 Interagency agreements shall include, but not be limited to the following information:
 - a. Identification of the target population(s) for pre-booking <u>aend</u> post-booking jail diversion;
 - a.b. Identification of the staff and their respective responsibilities;
 - b.c. The annual plan for cross-system training of mental health and criminal justice staff;
 - a.d. Specific pathways for the jail diversion process;
 - e.e. Identification of the staff and their respective responsibilities;
 - d.f. Description of the specific responsibilities/services of the participating agencies at each point in the pathway;
 - e.g. Data collection and reporting requirements or each system; and
 - b.h. Processes for regular communication, including regularly scheduled meetings.

d.—

for the presence of a serious emotional disturbance, serious mental illness, co-occurring substance use disorder, or an intellectual developmental disability within the first 24-48 hours of detention.

The CMH process shall include:

Linking eligible jail detainees to the array of community based mental health and substance use services available.

- Specific pathways in the pre-booking and post-booking jail diversion shall be described in an inter agency agreement for diversion.
- 3: Assign specific staff to the pre-booking and post-booking components to serve as liaisons to pridge the gap between mental health, substance use, and criminal justice systems, and to manage interaction between these systems. (Note: It is important to have a strong leader with good-communication skills and understanding of the systems involved and the informal networks needed to put the necessary systems in place.)

a.—

4.—Provide cross training for, and actively promote attendance of law enforcement and mental health personnel, which may include the Medical Director, nurses, and case holders on the pre-booking and post-booking jail diversion components; including but not limited to:

- a. Target groups for diversion;
- b. Specific pathways for diversion;
- c. Key players and their responsibilities;
- d. When and how to complete the Jail Diversion contact note and

Formatted: Indent: Left: 1.5", Right: 0", Space Before: 0 pt, Numbered + Level: 1 + Numbering Style: a, b, c, ... + Start at: 1 + Alignment: Left + Aligned at: 2.25" + Indent at: 2.5", Tab stops: Not at 1.46"

Formatted: List Paragraph, Indent: Left: 1.25", Numbered + Level: 4 + Numbering Style: 1, 2, 3, ... + Start at: 1 + Alignment: Left + Aligned at: 1.31" + Indent at: 1.56"

Formatted: List Paragraph, Right, Indent: Left: 1.5"

Formatted: List Paragraph, Indent: Left: 1.25", Numbered + Level: 4 + Numbering Style: 1, 2, 3, ... + Start at: 1 + Alignment: Left + Aligned at: 1.31" + Indent at: 1.56"

Formatted: Font: 12 pt

Formatted: List Paragraph, Indent: Left: 1.5", Numbered + Level: 1 + Numbering Style: a, b, c, ... + Start at: 1 + Alignment: Left + Aligned at: 2.25" + Indent at: 2.5"

Formatted: Indent: Left: 1.5", Right: 0", Space Before: 0 pt, Numbered + Level: 1 + Numbering Style: a, b, c, .. + Start at: 1 + Alignment: Left + Aligned at: 2.25" + Indent at: 2.5", Tab stops: Not at 1.71"

Formatted: Indent: Left: 1.5", Right: 0", Space Before: 0 pt, Numbered + Level: 1 + Numbering Style: a, b, c, .. + Start at: 1 + Alignment: Left + Aligned at: 2.25" + Indent at: 2.5", Tab stops: Not at 1.71"

Formatted: Not Expanded by / Condensed by

Formatted: Font: 11 pt, Not Expanded by / Condensed by

Formatted: Font: 11 pt

Formatted: Font: 11 pt

Formatted: Normal, Indent: Left: 1.5"

Formatted: Font: 11 pt

Formatted

Formatted: Normal, Indent: Left: 1.5", Right: 0", Nobullets or numbering, Tab stops: Not at 1.46"

Formatted: Normal, Indent: Left: 1.5"

Formatted: Normal, Indent: Left: 1.5", No bullets or numbering, Tab stops: Not at 1.69"

Formatted: Indent: Left: 1.5", No bullets or

Formatted: Indent: Left: 1.25", Tab stops: Not at 1.46"

Formatted: List Paragraph, Indent: Left: 1.25", Right: 0.15", Numbered + Level: 4 + Numbering Style: 1, 2, 3, ... + Start at: 1 + Alignment: Left + Aligned at: 1.31" + Indent at: 1.56"

e. Other information necessary to facilitate an effective diversion process.

5. Maintain a management information system that is HIPAA compliant and that can identify individuals brought or referred to the mental health agencySCCCMHA as a result of a pre-booking or post-booking diversion. The information system shall include:

a. Unique individual ID, as assigned by the CMHSP;

- b. The date of the diversion screening;
- c. The date of the diversion;
- d. The type of offense (crime);
- e. The individual's primary diagnosis.

The individual's unique ID can be used to link to the encounter data to obtain information regarding services, including billings. The CMHSCCCMHA must be prepared to share its jail diversion data with the departmentMDHHS upon request.

2. Additional Pre Booking Process Component Requirements:

The CMH shall have a diversion mechanism (or process) that clearly describes themeans by which an individual is identified at some point in the arrest process and diverted into mental health services. Specific pathways of the pre-booking diversion-process must be defined, and then included in the inter-agency agreement for diversion.

8. Additional PIn the post-Booking booking Process process Component component.

The CMHSCCCMHA shall establish regular meetings among key players, including police/sheriffs, court personnel, prosecuting attorneys, judges, pretrial staff and CMH-SCCCMHA representatives to encourage coordination of services and sharing of information.

3. Requirements:

9. The CMHSCCCMHA shall include case managers and other clinical staff who have experience in both the mental health and criminal justice systems whenever possible. If this not possible, documentation of recruitment efforts must be documented, and an intensive training program with specific criminal justice focus must be in place for case managers. Case managers and other clinical staff must provide care in a culturally competent manner.

1. The CMH shall have a clearly described mechanism to evaluate jail detainces for the presence of a serious emotional disturbance, serious mental illness, co-occurring substance use disorder, or an intellectual developmental disability within the first 24-48 hours of detention. The CMH process shall include:

1.

a.<u>I.</u> Linking eligible jail detainees to the array of community based mental health and substance use services available.

Formatted: Indent: Left: 1.25", Hanging: 0.25"

Formatted: Indent: Left: 1.25", Tab stops: Not at 1.46" + 1.46"

Formatted: List Paragraph, Indent: Left: 1.25", Right: 0.15", Numbered + Level: 4 + Numbering Style: 1, 2, 3, ... + Start at: 1 + Alignment: Left + Aligned at: 1.31" + Indent at: 1.56"

Formatted: Indent: Left: 1.25", Hanging: 0.25"

Formatted: Indent: Left: 1.5"

Formatted: Indent: Left: 1.25", Hanging: 0.25"

Formatted: No underline

Formatted: Indent: Left: 1.25", Tab stops: Not at 1.46"

Commented [JV1]: Duplicate

Formatted: List Paragraph, Indent: Left: 1.25", Right: 0.25", Space Before: 4.5 pt, Numbered + Level: 4 + Numbering Style: 1, 2, 3, ... + Start at: 1 + Alignment: Left + Aligned at: 1.31" + Indent at: 1.56"

Formatted: Font: 12 pt

Formatted: Font: 12 pt

Formatted: Font: 12 pt

Formatted: Font: 12 pt
Formatted: Font: 12 pt

Formatted: Font: 12 pt

Formatted: Font: 12 pt, Condensed by 0.1 pt

Formatted: Font: 12 pt

Formatted: Font: 12 pt

Formatted: Indent: Left: 1.25", Tab stops: Not at 1.46"

Formatted: List Paragraph, Indent: Left: 1.25", Right: 0.15", Space Before: 4.5 pt, Numbered + Level: 4 + Numbering Style: 1, 2, 3, ... + Start at: 1 + Alignment: Left + Aligned at: 1.31" + Indent at: 1.56"

Commented [JV2]: Duplicate

Formatted: Indent: Left: 1.25", Hanging: 0.25"

2. The CMH shall include ease managers and other clinical staff who have experience in both the mental health and criminal justice systems whenever possible. If this not possible, documentation of recruitment efforts must be documented, and an intensive training program with specific criminal justice focus must be in place for ease managers. Case managers and other clinical staff must provide eare in a culturally compotent manner.

V. <u>PROCEDURES</u>:

Mobile Crisis Unit, Mental Health Court Staff, CMH-SCCCMHA Staff

- Takes lead on identifying and screening individuals who may be eligible for a pre-booking or post-booking diversion or juvenile diversionary activities and proceeds with the diversion as appropriate and agreed upon by the individual served.
- Collaboratively works with area law enforcement and judicial staff to divert persons into the mental health system and make post-booking referrals to Mental Health Court as appropriate.
- 3. Works to continue ongoing support and collaboration and to maintain interaction between mental health and criminal justice systems. Diversion tTraining and collaborative meetings will be held to exchange information and address/support ongoing diversion efforts.
- Completes the Jail Diversion note when they divert an individual to community-based treatment and support services.

4.

5. Helps facilitate discharge appointments with Corizon and CMH community providers.

CMH-SCCCMHA Representative Staff/Mobile Crisis Unit

- Outlines the jail diversion process in a written inter-agency agreement with every law enforcement agency in the SCCCMHA's service area with the standards outlined in this policy-Standard 4.
- Offers and attends cross training on jail diversion and juvenile diversionary activity and actively
 promotes attendance of law enforcement and mental health personnel, which may include the
 Medical Director, nurses and case holders, on pre booking and post booking diversion as
 identified in Standard 5.

VI. <u>REFERENCES</u>:

PIHP/CMH-SCCCMHA Contract-FY 23, specifically attachment C6.9.5.1 Adult Jail Diversion Policy Practice Guideline

VII. EXHIBITS:

VIII. REVISION HISTORY:

Dates issued 03/05, 11/05, 05/08, 10/11, 05/13, 07/14, 07/15, 11/16, 11/17, 11/18, 03/22, 03/23.

Formatted: Indent: Left: 1.5", No bullets or numbering, Tab stops: Not at 1.46"

Formatted: Indent: Left: 0.83", No bullets or numbering