



# **Diversion First**

## **Fairfax County, Virginia**

*Progress Made Possible*

*Better Outcomes at the Intersection of Behavioral Health and Criminal Justice*

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# DIVERSION FIRST




## Fairfax County, Virginia

- “Urban Suburb” of Washington, D.C.
- 1.2 million population
- 400 square miles
- High: education, diversity, income, mobility, advocacy, achievement, and motivated towards excellence
- Low: crime, apathy, tolerance for mediocrity
- Data underneath the Data: HUGE pockets of economic, social, and other disparities, particularly among people with behavioral health needs

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## The Stars and the Moon Aligned in mid-2015



- Past “diverinterest” (‘a la ) and SIM map
- Some not-great outcomes
- Police Ad Hoc Commission recommendations
- Humbling funding rejection
- Advocacy
- BOS Chairman launch of Diversion First Stakeholders Group in August, 2015
- *Stepping Up* sign-on tethered us to the national effort



# Fairfax Definition

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.

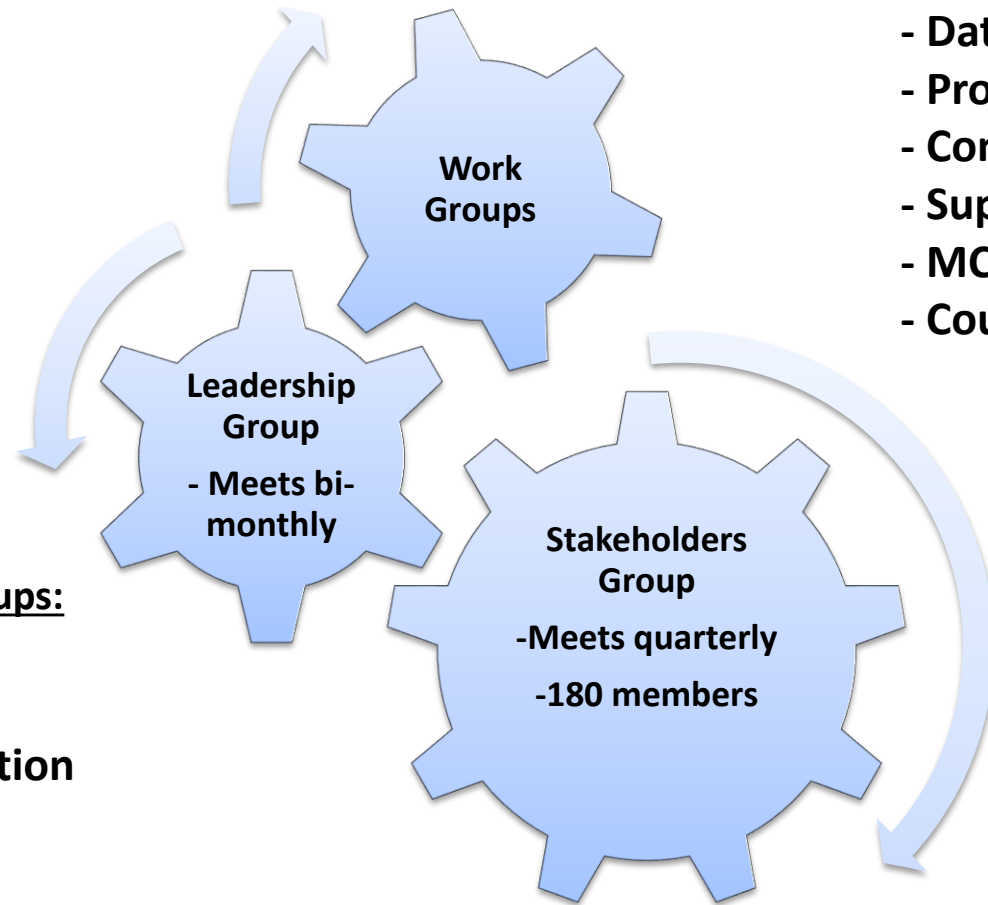
Diversion First is designed to prevent repeat encounters with the criminal justice system, improve public safety, promote a healthier community and is a more cost-effective and efficient use of public funding.

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## Diversion First

### Work Groups:

- Data and Evaluation
- Problem-Solving
- Communications
- Super Utilizers
- MCRC
- Courts



### Multiple Ad Hoc Work Groups:

- Medical Clearance
- Co-Responder Model
- Benefits post-incarceration
- Annual Report
- More as needed



# First Year Goal: Workforce Development

## Crisis Intervention Team Training

- Got back to CIT Memphis Model and galvanize around this model

## Mental Health First Aid

- Build on successful model, get preventionists to the table and train key stakeholders and community members

Goal: Open Merrifield Crisis Response Center  
by January 1, 2016 (6 months from first Stakeholders Group)

### **What happens at the MCRC?**

- Diversion from arrest for people experiencing behavioral health crisis
- Patrol officers from six jurisdictions to exchange custody
- Puts deputies, police officers and behavioral health staff together at one site

### **What did we have to do?**

- MOUs between jurisdictions, allowing for custody exchange after working through risk management concerns
- Cross-system policies and procedures
- Partnership evolution:  
Cooperation →  
Coordination →  
Collaboration

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## *Diversion First Highlights: MCRC*

- **Diverted from arrest: 680** individuals were diverted from arrest from January 2016 through September 2017 (375 in 2016, 305 in 2017)



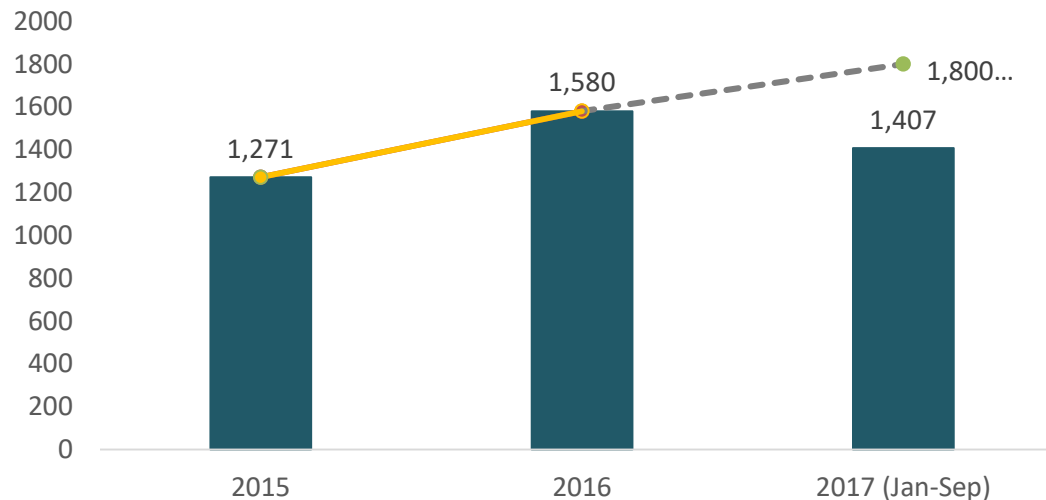
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## *Diversion First Highlights: Merrifield Crisis Response Center (MCRC)*

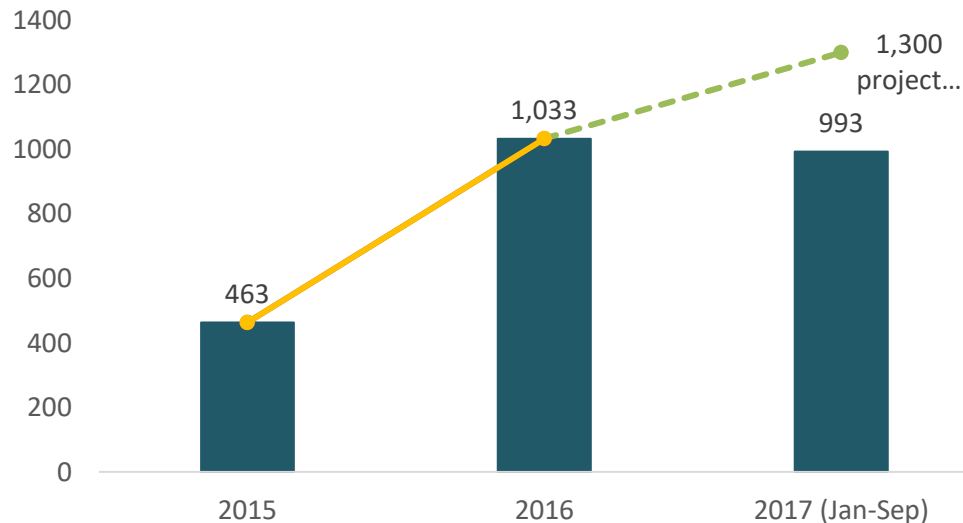
- **Law enforcement involved cases:**
  - The number of law enforcement involved cases increased by **25%** from 2015 to 2016
  - A **14% increase** is expected in 2017 from the previous year



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## *Diversion First Highlights: MCRC*

- **Emergency Custody Orders (ECOs):**
  - The number of ECOs increased by **123%** from 2015 to 2016
  - A **25% increase** is expected in 2017 from the previous year



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## Why Diversion First?



Roughly **1 in 3**  
jail inmates have  
**behavioral health**  
**issues.**



Inmates with  
behavioral health issues  
**stay 20 days longer**  
in jail than inmates  
without behavioral health  
issues.



**More than half**  
of the population  
**recidivate** in 3  
years.



# National Involvement and Recognition

- Stepping Up Summit\* and National Leadership Institute, 2016\*
- Course Corrections Mid-Atlantic Summit, March 2017\*\*
- Best Practice Implementation Academy, June 2017\*
- Data Justice Design Institute, September 2017\*
- NACo Data Justice Peer Exchange, November 2017\*
- Progress Made Possible Justice Behavioral Health Conference, December 2017\*\*

**TIP: Connect with as many national initiatives and opportunities as you can find!**

\*Competitive Application

\*\* Fairfax Invited Speaker

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## *Next Steps: Four Key Outcome Measures*

### Reduce

The number of people with behavioral health /SMI booked into jail

Intercept 1, 2, 3:  
Merrifield Crisis Response Center (MCRC), Police, Jail, Court

### Shorten

The average length of stay for people with behavioral health/SMI in jail

Intercept 2, 3:  
Jail, Court, CSB Jail-based services

### Increase

The percentage of connection to care for people with behavioral health/SMI in jail

Intercept 1, 5:  
CSB (MCRC), Homeless shelters, etc.

### Lower

Rates of recidivism

Intercept 4:  
Jail, Court, Police



## 2017 Focus on Courts

- Courts Stakeholders Group with Judge leadership
- Extensive pretrial service practice changes
- Strengthened collaboration across system especially in General District Court
- Virginia Supreme Court approved Drug Court application for Circuit Court
- Veterans Docket established and now CSB clinical staff are connected budgetarily
- Need to align Juvenile and Domestic Relations Court

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## 2017 Focus on Super-Utilizers

- Individuals with complex behavioral, physical, and/or social needs who are frequent users of a broad range of services and may have a high number of contacts with emergency medical technicians and law enforcement.
- Despite the large amount of resources devoted to this population, they are often provided in fragmented ways that do not lead to stabilization or improved outcomes for individuals.
- Not satisfied to just study! Our future co-responder model being built around this.

# HIGH UTILIZER CASE STUDY

## Fairfax County, VA - 1.2 million



About	
Gender	Male
Age	58
Ethnicity	Hispanic

### TOTAL CONTACTS IN THE PAST 6 MONTHS

24	17	75
EMS/Hospitals	Police	Jail
unk	9	Hospital
Homeless Services	Behavioral Health	6 admissions @<48 hours

## Representative Sample of Interactions

Date	System	Interaction
1/1/17-7/1/17	FRD	24 calls for service
1/1/17-7/1/17	EMT	24 transports
1/1/17-7/1/17	ED/Hospital	24 ED visits/6 admissions
7/1/16-6/30/17	CSB	9 Jail-based services contacts
1/1/17-7/1/17	Police	17 contacts with 13 arrests
1/1/17-7/1/17	Jail	75 nights in jail and counting

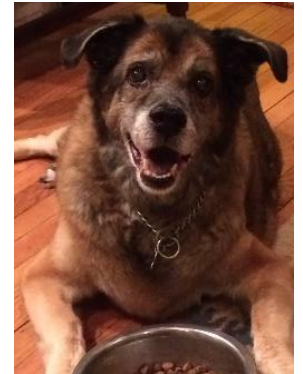
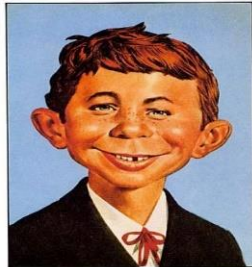
6 month total estimated expenditures: **\$168,179.80**



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Progress is possible:  
Here are some visual tips...

tension

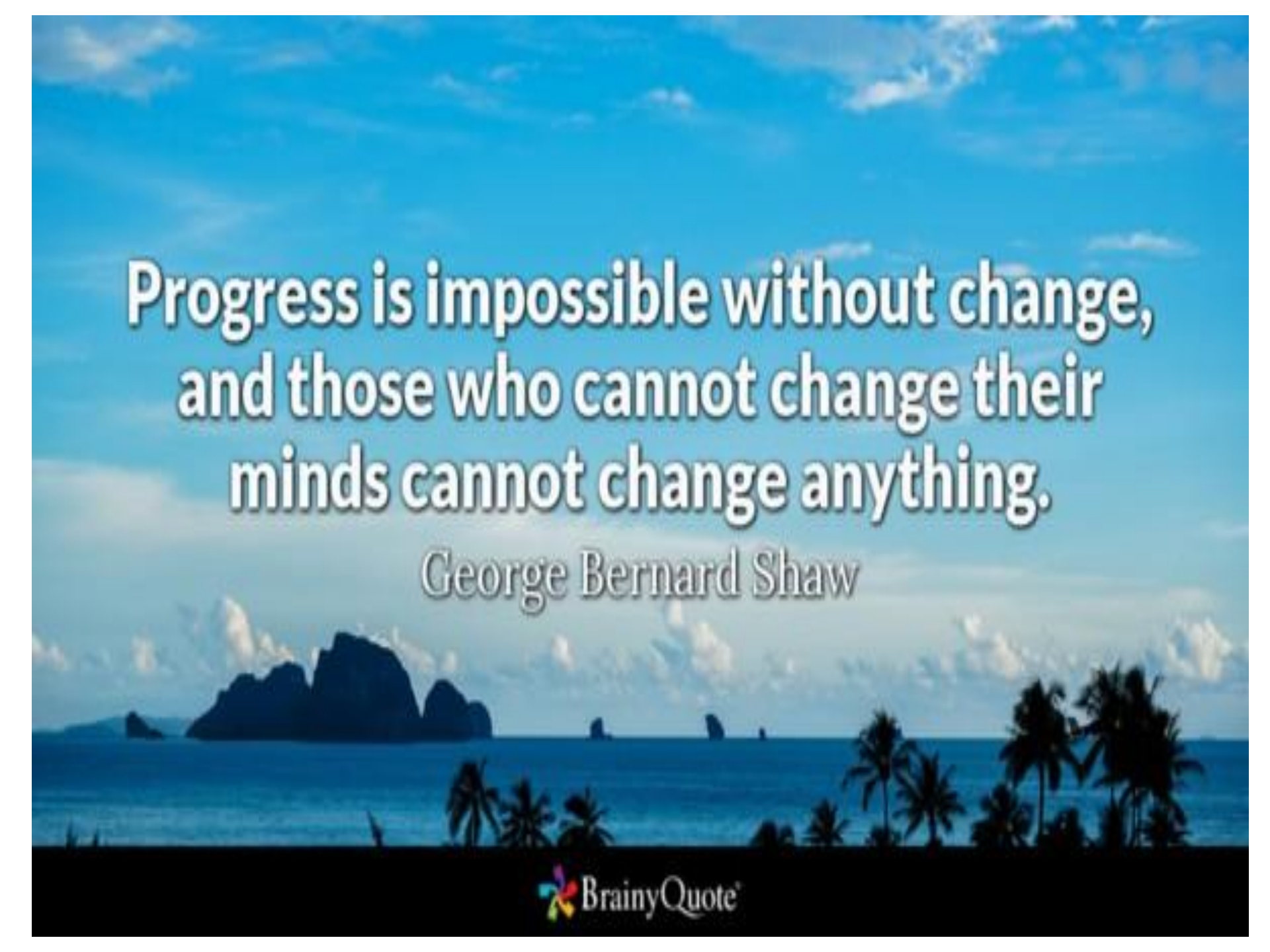


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## What's working...

- Engaged stakeholders and committed leaders
- Workforce development
- Crisis response drop-off center
- Organized, accountable work groups
- DATA DATA DATA
- Evidence based practice/practice-based evidence
- Use SIM as a framework
- Leadership commitment
- Engaged court system
- Passion to improve and develop system further
- Advocacy



**Progress is impossible without change,  
and those who cannot change their  
minds cannot change anything.**

George Bernard Shaw



Thanks!  
Please come visit!

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[www.fairfaxcounty.gov/diversionfirst](http://www.fairfaxcounty.gov/diversionfirst)