



SULZBACHER

HOUSING • HEALTHCARE • HOPE

Mental Health Offender Program (MHOP)

Proposal for Jail Diversion for Mentally Ill Misdemeanor Offenders

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STATEMENT OF JUDGE STEVE LEIFMAN Chair, Supreme Court of Florida Task Force on Substance Abuse and Mental Health Issues in the Courts before the Subcommittee on Oversight and Investigations of the Energy and Commerce Committee of the UNITED STATES HOUSE OF REPRESENTATIVES:

Nationwide, jails and prisons have become the largest psychiatric facilities in most states. It is estimated that there are nearly 14 times as many people with mental illnesses in jails and prisons in the United States as there are in all state psychiatric hospitals combined.....

Several years ago, the Florida Mental Health Institute at the University of South Florida completed an analysis examining arrest, incarceration, acute care, and inpatient service utilization rates among a group of 97 individuals in Miami-Dade County identified to be frequent recidivists to the criminal justice and acute care systems. Nearly every individual was diagnosed with schizophrenia, and the vast majority of individuals were homeless at the time of arrest. Over a five year period, these individuals accounted for nearly 2,200 arrests, 27,000 days in jail, and 13,000 days in crisis units, state hospitals, and emergency rooms. The cost to the community was conservatively estimated at \$13 million with no demonstrable return on investment in terms of reducing recidivism or promoting recovery. Comprising just five percent of all individuals served by problem-solving courts targeting people with mental illnesses, these individuals accounted for nearly one quarter of all referrals and utilized the vast majority of available resources.

Introduction

MHOP (Mental Health Offender Program) is a pilot program originated in response to the burden that mentally ill offenders place on the criminal justice system and the Pre-Trial Detention Facility through numerous misdemeanor arrests. This new program is based on the highly successful CHOP program that has been in existence for almost a decade. While this is a 9-month pilot program, the services are intended to provide longer term care than the pilot program provides. Clients suffering from mental illness often need longer term treatment than 9 months due to an extensive need for services including mental health treatment. Further, clients placed in permanent housing will be under 12-month leases. Therefore the facilitators of this program intend to pursue longer term funding from local, state and federal sources.

The primary goal of MHOP is to break the cycle of repeated misdemeanor arrests for mentally ill individuals and provide them the behavioral health and all other wrap-around support they need to successfully treat their mental illness and reintegrate back into the community. This will be accomplished by referring target individuals at their next arrest to MHOP and giving them the option of program enrollment in place of incarceration. The Jacksonville Sheriff's Office will identify the top offenders in Jacksonville and in Jacksonville Beach so that they will be flagged on their next arrest. Once these offenders are arrested again, the program will supply intensive mental health services in addition to permanent, supportive housing placement, a wrap-around Integrated Care Team of primary medical, dental, behavioral health, substance abuse and intensive case management that connects them to stable income through either job counseling and training or SSI,

SSDI, Medicare/Medicaid and other community services. The goal is to provide the participant with the tools necessary for successful transition from this program to independence and avoiding future arrest. This transition will allow more people to enter into the program by opening slots for future participants.

JSO estimates the cost of each misdemeanor booking to be approximately \$850. Additionally, several national studies have determined that the total cost to the public of a mentally ill homeless person, including repeated arrests, the use of high-end hospital crisis services and community social services, to be approximately \$50,000 per year. Those same studies concluded that placing these same persons into permanent housing and providing them with robust mental health services and other support saves the public approximately \$30,000 per year. Using these figures, MHOP has the potential of huge savings not only for the justice system but for the community at large. This, of course, does not factor in the more substantial benefit of saved human lives.

Proposed Program

The I.M. Sulzbacher Center for the Homeless, Inc. has provided holistic health care since opening its doors in 1995 and is the only shelter in Northeast Florida, and one of the few shelters in the state, that operates a full-service Federally Qualified Healthcare Clinic. Sulzbacher follows a comprehensive, continuum of care approach to services and from its inception, has partnered with local community providers to offer on-site user-friendly medical and mental healthcare and support services. By contracting with community agencies such as ; Gateway Community Services which provides substance abuse treatment on our site and Goodwill who provides employment placement on our site and providing our own extensive mental health and psychiatric services, the Center excels at providing a seamless flow of services to patients in one central location. These contracted services are already being paid for by Sulzbacher and should be considered a match to this program.

Sulzbacher has successfully referred patients through We Care for diagnostic treatment, medical services and surgery to Baptist Health, St. Vincent's Hospital, Mayo Clinic, and others. Sulzbacher works with the Community Asthma Project, Lutheran Social Services AIDS Care and Education Project, Rainbow Clinic of UF Health, as well as Gateway Community Services, River Region Human Services and Goodwill Industries. Additionally, Sulzbacher has served as a training site for numerous medical residents from the University of Florida. Residents include dentists, nurses, psychiatrists and doctors.

Sulzbacher directly links HIV+ homeless persons to the Boulevard Comprehensive Care Center (BCCC) HIV/AIDS medical services and the Magic Johnson Clinic. Sulzbacher has an informal arrangement with the City of Jacksonville Ryan White Title I Office to provide dental care for HIV+ patients who were experiencing difficulty in accessing dental care.

With the origination of the CHOP program, Sulzbacher has now formed a strong collaboration with the Jacksonville Sherriff's Office, the State Attorney's Office, the Public Defender's Office, Duval

County Judges and the Jacksonville Housing Authority for the identification, treatment and placement of chronically homeless offenders. We propose to do the same for mentally ill repeat misdemeanor offenders.

Sulzbacher seeks funding in the amount of \$350,000 for the employment of a full-time Psychiatric Nurse, part-time Doctor of Psychiatry, 2 full-time Intensive Case Managers, a Peer Support specialist and a SOAR Processor for the provision of services in support of Sulzbacher's partnership with the Jacksonville Sheriff's Office (JSO), the 4th Judicial Circuit State Attorney's Office (SAO), the Duval County Public Defender's Office (PDO), the Duval County Judges, Lutheran Services of Florida and the Jacksonville Housing Authority (JHA). MHOP will address the most severe mentally ill patients most of whom are homeless, a population who require intensive medical and case management support; however, as this RFP will demonstrate, the public will realize a substantial cost/benefit from its success.

DESCRIPTION OF OBJECTIVES AND SERVICES TO BE PROVIDED

The MHOP program will work as such: Upon notification of a target client's arrest, Sulzbacher staff (Psychiatric ARNP or other mental health professional) will attend the first court hearing with the client, advocate with the judge for MHOP enrollment, and enroll willing clients into the program. Program enrollees will be on supervision throughout the time they are in the program. MHOP enrollees will be immediately connected to Mental Health Services through our Federally Qualified Healthcare Center directly across the street from the jail where they will be provided with all medications necessary through our FQHC (not charged to this budget but matched through Sulzbacher budget) and if needed will be housed in a hotel/motel. Within two weeks of program enrollment, enrollees will be placed into Permanent Supportive Housing (1 bedroom apartment), either through one of Sulzbacher's three Permanent Supportive or Rapid Rehousing Housing Programs or with Duval County Housing Authority vouchers. It is anticipated that the program will have the capacity to serve up to 40 unduplicated clients annually-dependent on how many people need housing. Depending on the type of housing vouchers used, the program will have a duration ranging from 12 month to permanent (no time limit) for housing. The services will last from 9 months to 1 year depending on need as well as recruitment and hiring time. According to JSO for January-September (YTD) 2020; 658 of the people arrested have had mental health flags and of those 242 were homeless. This represents 37% of this population. The number that are homeless has increased over 300% from 2019 where only 10% of the mental health flags were identified as homeless.

MHOP will provide the client with intensive mental health services including Psychiatry, Counseling, medication management, peer support and substance abuse treatment on-site through our partner Gateway Community Services.

For those persons entering the program needing housing, they will be placed in scattered site apartments, using the "Housing First" model. The program will allow those persons suffering from

mental illness referred from JSO the security of permanent supportive housing and give them the opportunity to regain their independence. The desired outcome of the program is a decrease in arrests among the mentally ill population by stabilizing them through mental health services and all other wrap-around services needed. This will result in an increased number of persons reentering community life, and a cost savings to the community, law enforcement, and social service agencies.

Initial program goals are: 100% of clients enrolled in MHOP will be placed in Intensive Mental Health and Medical services, 100% requiring same in Permanent Supportive Housing (PSH) within two weeks of program enrollment; 80% of program enrollees will remain in Permanent Supportive Housing for at least one year; 100% of program enrollees will receive psychiatric services; 100% of program enrollees requiring same will receive substance abuse services.

Chief Judge Mahon and Court Administration would participate in the program via a dedicated position at the Duval County Courthouse which is included in this budget (see attached) That position would be entitled **Mental Health Jail Initiative Coordinator** and would be responsible for coordinating efforts of the Sulzbacher Center, judicial partners, and other community service providers; obtaining additional funding and resources for continuing these vital services; and engaging the community in the efforts of this program. The Coordinator would work with the Judges in Duval County who handle misdemeanor cases so that those cases involving mentally ill defendants may be placed under supervision to complete MHOP. Those cases would be handled in one specialty court so that the cases receive focused attention and supervision.

All enrollees in the program, both housed and unhoused, will receive not only comprehensive mental health and medical treatment but will also receive intensive case management, will have access to a Peer Support person and will be enrolled into all public benefit programs that they are entitled to through the benefits (SOAR) processor. This population needs far more than just mental health treatment in order to prevent further arrest and incarceration, and Sulzbacher is known for the breadth of other wrap-around services it provides.

Outcome Tracking and Reporting

Outcome data will be reported to the City Council Opioid and Mental Health Task Force on a monthly basis. **Each participant entering the program will be tracked with the following metrics**

- **Taxpayer Savings:**
 - Arrests**-how many arrests have occurred after entering the program
 - Jail Time**-number of days in jail and cost associated
 - Crisis Stabilization Unit (Baker Act) admissions**-number of times admitted to the CSU after program entry
- **Reduction in Homelessness:** number of participants that were housed through the program
- **Decrease in Recidivism:** number who returned to jail or homelessness
- **Substance Abuse Treatment and Recovery:** number who entered substance abuse treatment
- **Income Attainment via Employment or Mainstream Benefits-**
 - Number who attained employment
 - Number who attained mainstream benefits

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EXPENSES:

Personnel:	Request:	Sulzbacher Match
.75 Mental Health Jail Initiative Coordinator (to be housed at Courthouse)	\$50,000	\$0
.4 FTE Psychiatrist @ \$136,670 to devote time to working with individuals suffering from mental illness in this program = \$54,668. Of this total, \$27,334 is requested from this grant and \$27,334 will be matched from Sulzbacher's HRSA grant.	\$27,334	\$27,334
.5 FTE Psychiatric ARNP @ \$100,000 to work with persons suffering from mental illness in this program. New Hire	\$50,000	\$0
1 FTE Intensive Case Manager @ \$32,000 to provide intensive case management and linkage to services for clients in this program. New Hire	\$32,000	\$0
.75 FTE SOAR Processor @ \$40,000 to provide linkage to benefits for clients. New Hire	\$30,000	\$0
.75 FTE Peer Support Specialist @ \$30,000 to provide ongoing support and counseling for clients. New Hire	\$22,500	\$0
.25 Gateway Substance Abuse Counselor (contracted by Sulzbacher)	\$0	\$20,000
.25 Goodwill Job Counselor (contracted by Sulzbacher)	\$0	\$15,000
Total Personnel:	\$211,834	\$62,334

Fringe Benefits:	Request:	
Payroll Taxes @ 7.65%:	\$6,464	\$0
Health @ 11.75%:	\$9,929	\$0
Retirement @ 1.8%:	\$1,521	\$0
Worker's Compensation @ 2.55%:	\$2,155	\$0
Unemployment @ 1.25%:	\$1,056	\$0
Disability @ 1%:	\$845	\$0
TOTAL FRINGE @ 26% (benefits provided for .75 FTE and 1.0 FTE positions only):	\$21,970	\$0

Travel:	Request:	
Local travel for staff to perform home visitation and provide direct client services. Figured at 400 miles/month x 12 months x 2.5 FTE x \$.43 per mile = \$3,225.	\$3,225	\$0
Total Travel:	\$3,225	\$0

Equipment:	Request:	
4 cell phones and plans for program staff to ensure access to care for program clients, figured at \$50/month per phone and plan x 12 months = \$2,400.	\$2,400	\$0
4 laptop computers for data entry and accurate record-keeping, figured at \$625 each = \$2,500.	\$2,500	\$0
Total Equipment:	\$4,900	\$0

Supplies:	Request:	
Office supplies, to include paper, pens, pencils, file folders, binders, etc., for program staff to use in the execution of the program. Figured at \$71 per year.	\$71	\$0
Total Supplies:	\$71	\$0

Other:	Request:	
Housing through vouchers or other sources, figured at \$800 per month x 9 months x 20 clients = \$144,000.	\$144,000	\$0
Hotel costs for up to two weeks per client until they are placed in permanent housing, figured at \$300 per week x 2 weeks x 20 clients in one year = \$12,000.	\$12,000	\$0
Food vouchers for program clients until they can be connected to income or Foodstamps. Figured at \$100 per client x 20 clients = \$2,000.	\$2,000	\$0
Pharmaceuticals (will supply all necessary Psychotropic and other meds) approx \$1000 per patient per year.	\$0	\$20,000-40,000
Total Other:	\$158,000	\$20,000-40,000

TOTAL EXPENSES:	\$400,000	\$82,334-\$102,334
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