

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

PARTNER AGENCIES & OFFICES

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 re-entry, 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 resources to where they will have the greatest public safety impact and make the 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 Fiscal 2016 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. 3,947 NYPD officers representing every precinct, as well as transit officers stationed in Northern Manhattan, have completed training for Crisis Intervention Teams (CIT).

	DOC
	DOHMH
	DOP
	NYC H + H
	HRA
	NYPD

Mayor's Office
of Criminal
Justice

- The Pre-Arrestment Screening Unit (PASU) provided over 8,500 individuals with enhanced behavioral health screening at arraignments in Manhattan Criminal Court. As part of the PASU, nurse practitioners and other health professionals are piloting 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, but in Fiscal 2017 will expand to operate 24/7 at Manhattan Criminal Court.
- MOCJ and the U.S. Department of Veterans Affairs (VA) changed screening procedures to better identify veterans who are entering the criminal justice system. The question about military status on the Criminal Justice Agency (CJA) pre-arrestment interview form was changed to be more inclusive of all armed forces experience. If a veteran is identified through this interview, a notification is sent to a designated borough liaison from the VA, who then coordinates access to appropriate services, including housing and case management support. Veterans may also be diverted from the regular criminal courts into Veteran Treatment Courts as a result of this screening process. In order to enable these connections to services, CJA has signed into action data agreements to release to the VA the names of criminal justice-involved veterans in Kings, New York, Richmond, Bronx and Queens Counties.
- DOP developed in-house behavioral health teams that provide advisory services while screening and assessing the behavioral health needs of individuals on probation, connecting them to clinical and other community-based services. The teams conducted 1,582 case consultations in Fiscal 2016. On May 1, 2016, DOP implemented a behavioral health screening as part of their intake process to identify behavioral health needs, match services to probationers and provide probation officers with information about various behavioral health symptoms.
- DOC successfully integrated eight additional hours of mental health training into their Academy curriculum and will continue to expand this training in Fiscal 2017 to all uniformed officers as part of a comprehensive plan to train all officers in new DOC policies.
- NYC Health + Hospitals created three new specialized Program to Accelerate Clinical Effectiveness (PACE) units to provide services to inmates with behavioral health issues. These three intensive-care mental health units have served nearly 260 people this fiscal year, and a fourth unit is scheduled to launch in August 2016. In April 2016, the City announced that it will add eight more PACE units on Rikers Island 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. The new substance use program has served 2,246 individuals leaving Rikers.

In addition to the Task Force's accomplishments in Fiscal 2016, 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 have engaged the Institute for State and Local Governance at the City University of New York to evaluate the effectiveness of CIT, beginning in August. The evaluation will 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. Additionally, DOHMH and NYPD are working together to pilot public health diversion centers to provide officers an option that is neither hospitalization nor jail for people who do not pose a public safety threat.

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. In Fiscal 2016, 561 of those cases have been resolved. Since the start of the initiative, MOCJ, the Office of Court Administration, 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 staff specially trained in de-escalation and symptom identification. DOC and H+H staff on Rikers Island have held three week-long CIT trainings, which include site visits to mental health facilities that care for inmates who need additional support off of Rikers Island. Staff trained in crisis intervention techniques have been able to successfully de-escalate situations individually without officially dispatching a crisis intervention team. MOCJ, NYC Health + Hospitals 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.

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 Fiscal 2016, 65 individuals received both housing and support services through this initiative. The Task Force continues to work on identifying and securing affordable scattered-site apartments in order to bring the program to capacity.

The table below provides a list of performance indicators. More detailed information and additional indicators related to the initiative’s impact will appear in subsequent Mayor’s Management Reports.

PERFORMANCE INDICATORS	ACTUAL	TARGET		End Date
	FY16	FY16	Cumulative	
NYPD officers who completed crisis intervention training	3,947	990	5,500	6/30/2018
Participants enrolled in supervised release slots	911	677	3,048	6/30/2018
Individuals provided substance use disorder treatment services	2,246	2,000	4,000	6/30/2017
DOHMH permanent supportive housing slots	65	120	267	TBD

NOTEWORTHY CHANGES, ADDITIONS AND DELETIONS

None.

ADDITIONAL RESOURCES

For additional information go to:

- Behavioral Health and Criminal Justice Website:
<http://www1.nyc.gov/site/criminaljustice/work/bhtf.page>
- 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