

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 and intersecting 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 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 more fair.

Led by the Mayor's Office of Criminal Justice (MOCJ), the Mayor's Task Force on Behavioral Health and the Criminal Justice System partners 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 2016 include:

- NYPD developed a curriculum and expanded training 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. 394 NYPD officers completed training for Crisis Intervention Teams (CIT) from July to October 2015.
- The Pre-Arrest Screening Unit (PASU) provided over 2,000 individuals with enhanced behavioral health screening at arraignments in Manhattan criminal court. Through the PASU, nurse practitioners and other health professionals are piloting a process to identify

	DOC
	DOHMH
	DOP
	NYC H + H
	HRA
	NYPD

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those with immediate behavioral health needs, as well as connect them to their treating providers for care and potential diversion.

- 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-arraignment 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 with the VA to release the names of criminal justice-involved veterans in Kings, New York, Richmond, Bronx and Queens Counties to the Veterans Administration.
- The Department of Probation developed in-house behavioral health teams and provides advisory services in the screening and assessment of the behavioral health needs of individuals on probation, connecting them to clinical and concrete community-based services. The teams have conducted 336 case consultations.
- The Department of Correction has successfully integrated eight additional hours of mental health training into their Academy curriculum and will develop a plan for expanding this training to all uniformed officers working with inmates experiencing mental health issues.
- NYC Health + Hospitals has created three new specialized units to provide services to inmates with behavioral health issues. These three units have served nearly 117 people between July and October, and the final unit is scheduled to be opened in early 2016. Substance use disorder treatment has 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 727 individuals leaving Rikers from July to October.

In addition to the Task Force's accomplishments in first four months of 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. Thus far, most of the officers trained in CIT are in Northern Manhattan, but some have also been from precincts in other boroughs, as well as transit officers who are stationed in Northern Manhattan. In order to measure the impact of the CIT training, MOCJ and NYPD will conduct an evaluation that looks at factors such as change in 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 July 2015, MOCJ reached their six-month goal (two months early) of disposing of 50 percent of the cases through trials, pleas and some dismissals. The Center for Court Innovation assisted with identifying numerous systemic drivers of delays, such as backlogs in DNA testing, and worked with MOCJ to review and identify trends in the oldest cases with detained defendants (over 150 cases citywide). MOCJ facilitates monthly discussions among judges, district attorneys, defense attorneys and other major court players both at the citywide and borough levels to review and respond to current case processing trends.

DECREASING VIOLENCE ON RIKERS ISLAND

DOC has adapted the CIT model, aimed at improving 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. Corrections and health 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 the island. Staff trained in crisis intervention techniques have been able to successfully de-escalate situations without officially dispatching a team. MOCJ and DOC will continue to measure the effect that the CIT training has on incidents of violence and use of force.

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 has 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 both shelter and corrections services over the past four years in an effort to target that population for 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.

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

PRELIMINARY PERFORMANCE INDICATORS				
	July - Oct FY16	FY16 Target	Cumulative Target	End Date
NYPD officers who completed crisis intervention training	394	990	5,500	6/30/2018
Participants enrolled in supervised release slots	0	677	3,048	6/30/2018
Individuals provided with substance use disorder treatment services	727	2,000	4,000	6/30/2017
DOHMH permanent supportive housing slots	0	120	267	TBD

NOTEWORTHY CHANGES, ADDITIONS AND DELETIONS

- The FY16 and cumulative targets and the end date for "Participants enrolled in supervised release slots" were revised from the FY15 Mayor's Management Report to only reflect Supervised Release expansion through the Behavioral Health Task Force.

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

