

DREXEL UNIVERSITY &  
UNIVERSITY OF PITTSBURGH



## York County

Report of the Cross-Systems Mapping Workshop  
September 28<sup>th</sup> and 29<sup>th</sup>, 2011

Transforming Services  
for Persons with Mental Illness in  
Contact with the Criminal Justice System

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## York County, Pennsylvania

### Transforming Services for Persons with Mental Illness in Contact with the Criminal Justice System

#### Introduction

The purpose of this report is to provide a summary of the Pennsylvania Mental Health and Justice Center of Excellence *Cross-Systems Mapping* workshop held in York County, Pennsylvania, on September 28<sup>th</sup> and 29<sup>th</sup>, 2011, conducted at the York County Administration Building, 28 East Market Street, York, PA. The York County Criminal Justice Advisory Board (CJAB) hosted the workshop as part of an ongoing process of developing collaborative systems of support for individuals who have mental illness and who come in contact with criminal justice. This report (and accompanying electronic file) includes:

- A brief review of the origins and background for the workshop;
- A summary of the information gathered at the workshop;
- A cross-systems intercept map as developed by the group during the workshop;
- A description of each intercept along with identified gaps and opportunities;
- An action planning matrix as developed by the group; and
- Observations, comments, and recommendations to help York County achieve its goals.

#### Background

York County Probation and multiple other stakeholders requested the Center of Excellence *Cross-Systems Mapping* workshop to promote progress in addressing criminal justice diversion and treatment needs of adults with mental illness in contact with the criminal justice system. As part of the workshop, they were requested to provide assistance to York County with:

- Creation of a map indicating points of interface among all relevant York County systems;
- Identification of resources, gaps, and barriers in the existing systems; and
- Development of priorities to promote progress in addressing the criminal justice diversion and treatment needs of adults with mental illness in contact with the criminal justice system.

Prior to the workshops, the Center of Excellence gathered information about York County through a *Community Collaboration Questionnaire*, a preliminary meeting by conference call, and gathering of documents relevant to the population.

The participants in the workshops included 28 individuals representing multiple stakeholder systems including mental health, substance abuse treatment, human services, corrections, advocates, family members, consumers, law enforcement, and the courts. A complete list of participants is available in Appendix A (pg. 33) of this document. Patricia A. Griffin, PhD, and Nancy Wieman, MS, facilitated the workshop sessions. Sarah Filone, MA, and Katy Winckworth-Prejsnar also provided support.

## About the Workshop

Upon receiving a grant from the Pennsylvania Commission on Crime and Delinquency and the Pennsylvania Department of Public Welfare's Office of Mental Health and Substance Abuse Services in late 2009, the Pennsylvania Mental Health and Justice Center of Excellence was developed as a collaborative effort by Drexel University and the University of Pittsburgh. The mission of the Center of Excellence is to work with Pennsylvania communities to identify points of interception at which action can be taken to prevent individuals with mental illness from entering and penetrating deeper into the justice system.

The Center of Excellence workshops, *Cross-System Mapping* and *Taking Action for Change*, are unique services tailored to each Pennsylvania community. These workshops provide an opportunity for participants to visualize how mental health, substance abuse, and other human services intersect with the criminal justice system.

This workshop is unlike other types of consultations or staff development training programs. A key element is the collaborative process. Meaningful cross-system collaboration is required to establish effective and efficient services for people with mental illness and co-occurring substance use disorders involved in the criminal justice system. This makes the composition of the group extremely important. While some workshops involve advertising to the entire provider community, it is essential in the *Cross-System Mapping* workshops that the organizers gather a group that represents key decision makers and varied levels of staff from the relevant provider systems. Center of Excellence staff work with this group, serving as expert guides to help:

- Create a cross-systems map indicating points of interface among all relevant local systems;
- Identify gaps, opportunities, and barriers in the existing systems;
- Optimize use of local resources;
- Identify and prioritize necessary actions for change; and
- Develop an action plan to facilitate this change.

Upon completion of the workshops, the Cross-Systems Map included in the report is provided in both print and electronic formats. It is meant to be a starting point. The electronic files can be revised over time to reflect the accomplishments and changes in the planning process.

## Objectives of the Cross-Systems Mapping Exercise

The *Cross-Systems Mapping Exercise* has three primary objectives:

1. Development of a comprehensive picture of how people with mental illness and co-occurring substance use disorders move through the York County criminal justice system along five distinct intercept points: Law Enforcement and Emergency Services, Initial Detention/Initial Court Hearings, Jails and Courts, Re-entry, and Community Corrections/Community Support.
2. Identification of gaps, resources, and opportunities at each intercept for individuals in the target population.
3. Development of priorities for activities designed to improve system and service level responses for individuals in the target population.

## Keys to Success

### Existing Cross-Systems Partnerships

York County's history of collaboration between the criminal justice and behavioral health systems is reflected in a number of existing local efforts that were identified prior to the mapping. For example:

- York County Criminal Justice Advisory Board (CJAB)
- York County Problem Solving Courts
  - Adult DUI, Drug and Mental Health, Juvenile Drug, Fast Track Drug and Mental Health
- Crisis Intervention Team (CIT) for Law Enforcement
- Well-organized business continuity plan and a Critical Incident Stress Management (CISM) team.

### Consumer/Family Involvement in the Workshops

- The family perspective was provided by Rose Aberghini of NAMI PA York County.

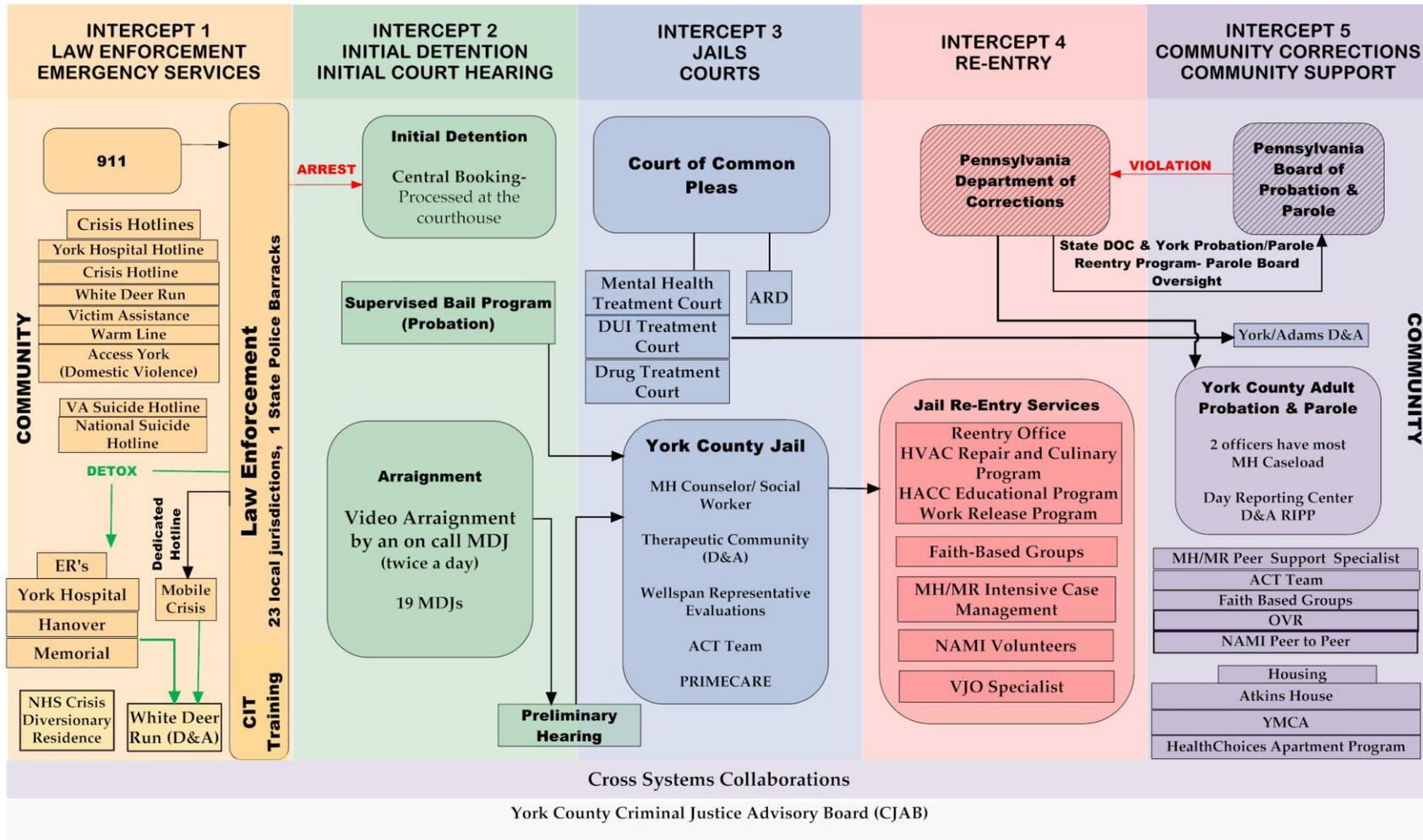
### Representation from Key Decision Makers in the Workshops

- The workshops included wide cross-system representation and involved many of the key decision makers. Opening remarks by Alfie Ford, CJAB Coordinator set the stage and established a clear message as to the importance of the workshop. Alfie also welcomed participants and introduced the facilitators.

### Data Collection

- In addition to the information gained during the workshop, the information in this report was developed from conversations with and questionnaires completed by key stakeholders in York County in preparation for the workshop.

# York County Cross Systems Map



## York County Cross Systems Narrative

The *Cross-Systems Mapping* exercise is based on the Sequential Intercept Model developed by Mark Munetz, M.D. and Patty Griffin, Ph.D.,<sup>1</sup> in conjunction with the National GAINS Center. In this workshop, participants were guided to identify gaps in services, resources, and opportunities at each of the five distinct intercept points.

This narrative reflects information gathered during the *Cross-Systems Mapping Workshop*. It provides a description of local activities at each intercept point, as well as gaps and opportunities identified at each point. This narrative may be used as a reference in reviewing the York County Cross-Systems Map. The cross-systems local task force may choose to revise or expand information gathered in the activity.

The gaps and opportunities identified in this report are the result of “brain storming” during the workshop and include a broad range of input from workshop participants. These points reflect a variety of stakeholder opinions and are, therefore, subjective rather than a majority consensus.

### General Description of Services and Cross-System Collaboration

York County was created on August 19, 1749, from parts of Lancaster County and named either for the Duke of York, an early patron of the Penn family, or for the city and shire of York in England. Its county seat is the city of York. Based on the Articles of Confederation adopted in York by the Second Continental Congress on November 15, 1777, the local government and business community began referring to York in the 1960s as the first capital of the United States of America. The designation has been debated by historians ever since. Congress considered York, and the borough of Wrightsville, on the eastern side of York County along the Susquehanna River, as a permanent capital of the United States before Washington, D.C. was selected.

As of 2010, the population was 434,972. It is in the Susquehanna Valley, a large fertile agricultural region in South Central Pennsylvania. According to the U.S. Census Bureau, the county has a total area of 910 square miles (2,358 km<sup>2</sup>), of which 904 square miles (2,343 km<sup>2</sup>) is land and 6 square miles (15 km<sup>2</sup>) is water. The county is bound to its eastern border by the Susquehanna River. Its southern border is the Mason-Dixon Line, which separates Pennsylvania and Maryland.

The County has been building a continuum of criminal justice and mental/behavioral health services that provides a basic foundation for continued growth and reorganization on all levels. There are a number of established links, both formal and informal, between the courts, probation, police departments, corrections and the mental health system that include, including but not limited to:

- York County treatment courts recently received grant funds to hire a part time Treatment Court Community Relations and Development Coordinator to create an active advisory board for the Treatment Courts
- York County's Supervised Bail Program

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<sup>1</sup> Munetz, M. & Griffin, P. (2006). A systemic approach to the de-criminalization of people with serious mental illness: The Sequential Intercept Model. *Psychiatric Services*, 57, 544-549.

- York County Prison's Reentry Program

York County provides an extensive and detailed network of care website for individuals, families and agencies concerned with behavioral health. It provides information about behavioral health services, laws, and related news, as well as communication tools and other feature is available at:

<http://york.pa.networkofcare.org/mh/home/index.cfm>

## Intercept I: Law Enforcement / Emergency Services

### 911

The **York County Department of Emergency Services, 911 Center** is overseen by 911 Director, Julio Mendez. The department is comprised of an administrative staff that includes a Police, Fire, and EMS Coordinator; Quality Assurance staff; a GIS Division; Data Entry Specialists; Records Clerks; Information Services Specialists; Mobile Data Computer Specialists; and Radio Technicians. The operations staff includes: 3 Lead Shift Supervisors, 6 Shift Supervisors, the Training Department, and 71 full-time and 10 part-time Communications Specialists. Together, they provide centralized communications for 21 Police Departments, 7 Paramedic Units, 33 ambulance companies, 61 fire departments, various other local and state agencies, and over 410,000 citizens.

York County 911 Communications handles over 1,100 calls for assistance each day.

### Crisis Services

York County Mental Health/ Mental Retardation provide **mobile crisis** services to the county. The mobile crisis team consists of 17 full time employees, three part time workers, and a crisis supervisor. This team is located within York Hospital, but staff travel to other area hospitals when crisis services are required. Mobile crisis also has a dedicated “police line” specifically for police use. This line is overseen by a crisis supervisor and is used both for consultation and mobile crisis service requests. Mobile crisis worker(s) meet law enforcement on the scene of an incident approximately 7-15 times each week.

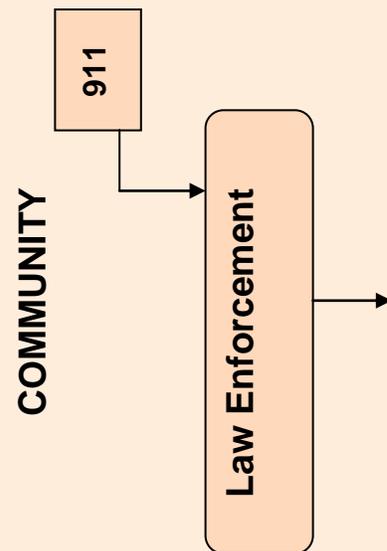
After hours, there is also an alternative mobile site at **the NHS Human Services Crisis Diversionary Residence**. This is a 10 bed short-term, non-hospital based program that is staffed 24 hours a day, seven days a week. It provides treatment and support for acute psychiatric crises to aid in stabilizing symptoms. The Crisis Diversionary Residence has been in operation for five years and is funded jointly by CCBH and the Crisis Intervention Team (CIT) grant. The average length of stay in this facility is 3-5 days.

In addition, there are **crisis walk-in centers** available in Hanover Hospital (7 days a week 8 AM – 8 PM), and Edgar Square (**WellSpan ReadyCare**; Monday through Friday 8 AM – 8 PM).

### Crisis Hotlines

York County has a **crisis hotline** with 6 open lines, and mobile crisis operates 3 lines, plus a **designated police line**.

### Intercept 1 Law enforcement



In addition, the **Mental Health Association of America** provides a **Warm Line** Monday through Friday 5PM – 9PM.

**National Suicide Hotline:** 1-800-273-TALK (8255), Press 1 for Veterans.

**National VA Suicide Hotline:** 1-800-273-8255.

### **Victims' Services**

**ACCESS-York** is a program that seeks to eliminate domestic violence and offer support, education, and a safe environment for victims of domestic violence. As of January 1, 2008, ACCESS-York became a program of YWCA York.

As of January 1, 2009, the **Victim Assistance Center (VAC)** became a program of YWCA York. The VAC provides crisis intervention, information, advocacy, ongoing counseling, and support to the people of York County who are victims of sexual violence or other violent crimes. VAC and ACCESS lead three countywide task forces to ensure victims of crime receive quality treatment.

Victims Services also operates hotlines for domestic violence/abuse [717.846.5400 or 800.262.8444; In Hanover: 717.637.2235], and for sexual violence [717.854.3131 or 800.422.3204]

In addition, York County residents have access to the following resources:

<p><b>PA Coalition Against Domestic Violence</b> 6400 Flank Drive, Ste. 1300 Harrisburg, PA 17112</p>	<p><b>daytime:</b> 800-932-4632 <b>website:</b> <a href="http://www.pcadv.org">www.pcadv.org</a></p>
<p><b>PA Coalition Against Rape</b> 125 North Enola Drive Enola, PA 17025</p>	<p><b>daytime:</b> 717-728-9740 <b>24 hour hot line:</b> 888-772-PCAR <b>website:</b> <a href="http://www.pcar.org">www.pcar.org</a></p>
<p><b>PCCD Victims Compensation Program</b> 3101 N. Front Street Harrisburg, PA 17108</p>	<p><b>daytime:</b> 717-783-5153 800-233-2339 <b>website:</b> <a href="http://www.pccd.state.pa.us">www.pccd.state.pa.us</a></p>
<p><b>MADD, PA State Office</b> 2323 Patton Road Harrisburg, PA 17112</p>	<p><b>daytime:</b> 717-657-3911 <b>24 hour hotline:</b> 866-439-6233 (Pittsburgh) 800-848-6233 (Harrisburg) <b>website:</b> <a href="http://www.maddpa.org">www.maddpa.org</a></p>

## **Law Enforcement**

York County houses 23 law enforcement jurisdictions and one state police barrack. The county is home to a **Crisis Intervention Team (CIT)** training program for law enforcement officers. Training was offered four times last year, with a total of 85 officers trained to date. The county's 5<sup>th</sup> CIT training is scheduled for November 2012. There are several CIT coordinators working across county systems including a Law Enforcement Coordinator, a NAMI Coordinator, and a Mental Health Coordinator. As of April 30<sup>th</sup>, 2011 55 CIT Data sheets (incident reports) were submitted by law enforcement officers. These reports revealed that consumer age ranged from under 12 to over 60, the majority of the calls were for male consumers (37 males, 18 females), and the most prevalent race was Caucasian (44). The most common reason for a CIT call was "suicide/homicide threats and/or attempts" (21), followed by "welfare checks" (13). 41 of the 55 contacts reported prior mental health treatment, and 37 of the 55 had been prescribed medication. Only 5 of 55 consumers were reported to be "under the influence of drugs and/or alcohol."

44 of the 55 CIT contacts involved no injuries to consumers. During 11 contacts, consumers had received injuries prior to the CIT Officer arriving on the scene. Five involved superficial cuts, one was a self-inflicted gunshot wound, two were medication overdoses, and one involved minor injuries to a neighbor prior to the officer arriving on scene. Only two incidents involved the officer using physical force with no injuries to the officers or to the consumers. No CIT Officer has been injured during contacts. For more data from the current CIT data sheets, see Appendix A.

## **Hospitals**

### **York Hospital**

1001 South George Street  
York, PA 17403 (717) 851-2345

### **Hanover Hospital**

300 Highland Avenue  
Hanover, Pennsylvania, USA 17331

### **Memorial Hospital**

325 South Belmont Street  
York, Pennsylvania 17405

## **Detoxification Services**

**White Deer Run (WDR)** of York is an adult co-ed, inpatient, detoxification and rehabilitation Drug and Alcohol Program located at 106 Davies Drive, York, PA 17402. WDR provides both **Inpatient Non-Hospital Detoxification** and **Residential Chemical Dependency Rehabilitation** (group and individual counseling) to York County residents. The average length of stay is 3.5 days.

➤ **Identified Gaps**

- Not all jurisdictions are trained in Crisis Intervention Team (CIT)
- State Police have not been trained in CIT
- Broader representation needed from District Attorney, Public Defender, judges, and law enforcement
- Barriers when crossing jurisdiction for CIT trained officers
- The county is hoping to get some correctional officers trained
- Difficulty with communication between dispatch and CIT officers. 911 are not dispatching CIT officers to a CIT needed scene
- Law enforcement are self-dispatching – In other words law enforcement is determining whether the call is mental health related rather than having to direct those calls to CIT trained officers rather than 911 contacting CIT police
- High turnover for 911
- CIT training for 911 dispatchers is only a couple of hours --- needs to be more specialized
- 911 does not sit on the CJAB board
- Lack of data across all intercepts
- D&A (White Deer Run) has a hard time contacting the VA and figuring out a client's eligibility
- To a large degree, kind of insurance influences what kind of treatment an individual can access

➤ **Identified Opportunities**

- CIT (40 hour training) – 85 officers trained to date
- Cross jurisdictional work
- Training supported by the jail and county chiefs
- NAMI partner/coordinator
- Law enforcement has a dedicated hotline that is a direct line to mobile crisis
- Law enforcement can use it for consultation or to ask Mobile Crisis to come the scene
- Increases in community utilization of mental health services as a result of CIT
- 911 collects strong data
- Wait time at ER's are short --- York Hospital houses the Crisis Services in the ED
- 3 day follow-up for mobile crisis
- ER's for D&A – Do referral to White Deer Run 7 county detox & wider network (Non-hospital – average 3.5 days of treatment)
- VA nearby – Lebanon County (Julie B is the county's Veterans Justice Outreach Specialist)
- NHS Crisis Residence had 10 crisis beds
- Mobile Crisis will go out to meet police officers (10-15 times a week)
- HealthChoices has been instrumental in Crisis Service
- Wellspan (Community Hospital) – Looking more closely at individuals who are "Superusers"
- York County first in PA to hire a Criminal Justice Planner through CJAB

## Intercept II: Initial Detention / Initial Court Hearing

### Arrest and Initial Detention

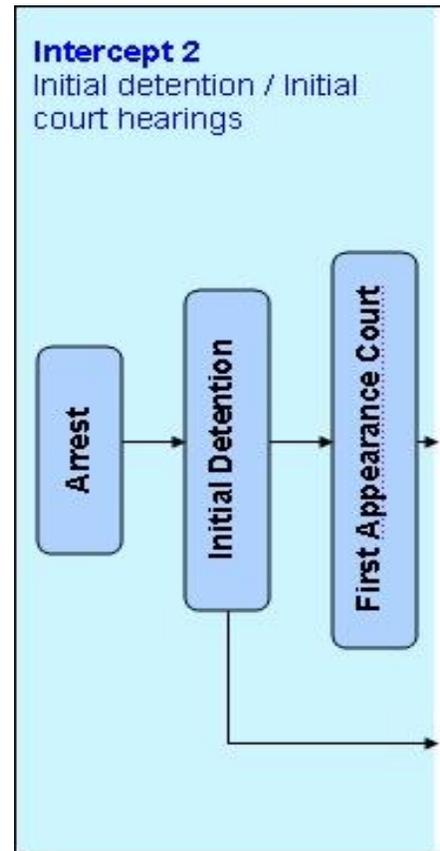
When an individual is arrested in York County, he/she is taken to **Central Booking** in the York County Courthouse. Central booking has been in operation for 5-6 years and is run by the York County Sheriff's Office.

### Arraignment

Arraignment occurs within **Central Booking** and is conducted by the on-duty Magisterial District Judge (MDJ; 1 of the counties 19 MDJs is on-duty at all times). This arraignment is typically done via video conference, but can be done face-to-face as well.

### Pre-Trial Services

**York County Probation** operates a **Supervised Bail Program** through which supervision and monitoring are provided to defendants on nominal or reduced bail while awaiting case disposition. Designated **Supervised Bail Officers** work with Central Booking (1 officer for screening and identification) and the York County Prison.



#### ➤ **Identified Gaps**

- Lack of linkage between bail officer and community resources
- Lack of behavioral health intervention at this intercept
- No central mental health database
- Some rural law enforcement districts process individuals rather than traveling to central booking
- Lack of continuation of care and communication between health care providers
- No centralized insurance information (a common gap in most counties)
- Delays between arrest and getting the blood alcohol tests back (average 2 weeks – which means it is taking that long to charge individuals)

#### ➤ **Identified Opportunities**

- Have a centralized booking facility
- Supervised bail office under the probation office
- County MH/MR contracts with health provider (Wellspan)

## Intercept III: Jails / Courts

### York County Prison

The **York County Prison** is located at 3400 Concord Road York, PA 17402. The current census is 2,400 inmates, 1,535 of which are York County inmates. Another 60-65 detainees are State Department of Corrections inmates, and the remaining 800 – 805 are Immigration Service (ISE) Detainees. The prison processes 23,000 admissions a year, 9,000-10,000 of which are York County inmates. 30-35% of the prison population is pretrial.

An estimated 20-25% of the prison population is currently taking psychotropic meds (including ISE detainees), and the medical provider reports that instances of mental health issues are pretty average across ISE and York County populations.

Upon intake, inmates are screened for veteran status and substance use (Texas Christian University Screen short form).

### Mental Health/ Drug and Alcohol Services

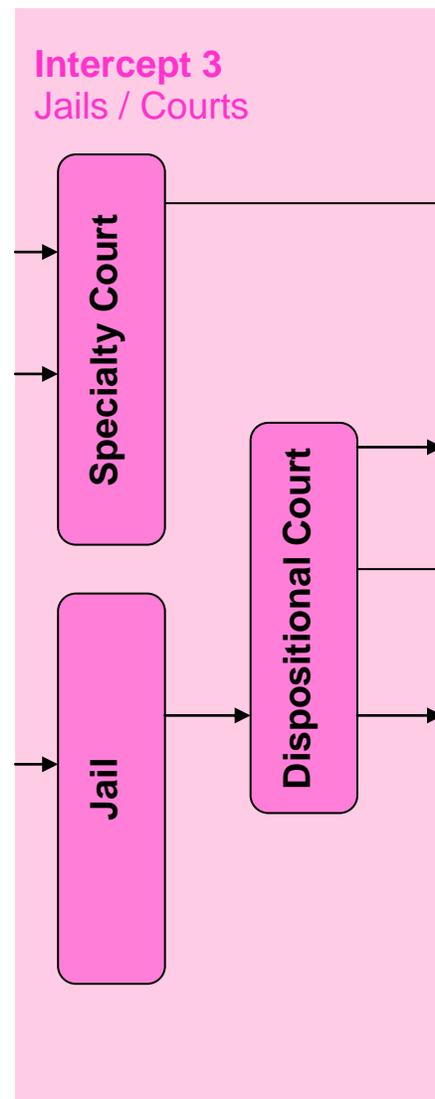
**Primecare Medical, inc.** is contracted to provide all medical and mental health services within the prison. In addition, MH/MR provides in-jail **Intensive Case Management (ICM)** to incarcerated clients on a bi-weekly basis.

The York County Prison also houses a Cognitive Behavioral based **Quasi-Therapeutic Community Program** for substance use treatment. This is a county funded, voluntary program for both pre-trial and sentenced inmates with substance use issues. The prison is currently working with York College on data collection to assess the therapeutic community program and its outcomes.

In addition, York County inmates have access to **Narcotics Anonymous (NA)** and **Alcoholics Anonymous (AA)** groups.

**Good News Jail and Prison Ministry** provides trained volunteers to run group programming at night (parenting, life skills, etc.).

**Atkins House** also provides several services for York County's female inmates: **life skills classes** twice a week (approximately 20 women per class), individual **Drug and Alcohol Abuse Counseling** (approximately 120 women each year), and a once weekly **HIV/AIDS education group**.



## Courts

York County houses a Mental Health Court, a DUI Court, and a Drug Court.

### Mental Health Court

The **York County Mental Health Court** is a pretrial diversionary program for offenders diagnosed with a serious and persistent mental illness. In order to be eligible for the program, an individual must be a resident of York County, Pennsylvania and have a major Axis I diagnosis of Major Depressive Disorder, Bipolar Disorder, or Schizophrenia, as defined by the DSM IV-TR. Rarely, but with sufficient cause, other diagnoses may be considered. Specifically, the diagnosis of Post-Traumatic Stress Disorder (PTSD) is accepted if the individual is a veteran of any branch of the military. Offenders are referred to the program by Police Officers, District Justices, Attorneys, Probation Officers, Case Workers, and Judges. A team evaluates the appropriateness of the referrals and then offenders are either accepted into Mental Health Court or referred back to the criminal justice system. In order for an offender to participate in Mental Health Court he/she is required to enter a guilty plea to the offense(s) with which he/she is charged.

The Mental Health Court is presided over by Judge Blackwell and has a current docket of 25 (capacity: 35). The program takes approximately 18 months to complete and consists of three phases. Phase I begins with weekly appointments with the Probation Officer and/or Resource Coordinator, along with a weekly Court appearance. Offenders that have demonstrated compliance with their treatment plans for approximately six months are promoted to the next phase. With each successive phase, offenders are monitored less frequently and less intensely, so long as they continue to be in compliance with their treatment plans. Sanctions are utilized in the event of non-compliance.

Once an individual completes Mental Health Court, offenses may either be reduced in gradation or dismissed. This is determined by prior record and the nature of the immediate offense(s). A graduation ceremony marks completion of the program

### DUI Court

The **York County DUI Court** is also presided over by Judge Blackwell, although Judge Kennedy will be assuming the position in 2012. This court began in response to the prevalence of DUI charges filed in York County (Approximately 1/3 of York County Criminal Cases are DUIs). The court has the capacity to serve 100 individuals and is staffed with two probation officers, one case manager, and an administrative assistant. Screening for entrance into the program is available to those defendants who are detained at the York County Prison, are currently on pre-trial supervision, are currently on probation supervision, and/or are awaiting preliminary arraignment before District Justice for an eligible criminal offense. Eligible DUI Treatment Court participants must have an addiction to substances of abuse and/or alcohol. The defendant, arresting officer, defendant's family or friend(s), attorney or Probation Officer can indicate substance abuse or addiction for the defendant. Defendants must be determined drug dependant according to the DSM-IV. Current eligible DUI offenses are Second Offense Third Tier; Third offense Second Tier or a Third offense Third Tier within ten years. Additionally, the defendant must be 18 years of age or older and a resident of York County, Pennsylvania.

DUI Court participants are sentenced to five years of Intermediate Punishment. The first year consists of SCRAM (Secure Remote Continuous Alcohol Monitoring with electronic monitoring) monitoring or 90 days of house arrest and one year of SCRAM depending on the offense and tier mandatory. After the completion of this year, the defendant is removed from house arrest, but is subject to continued random SCRAM (continuous alcohol) monitoring and random ETG urine monitoring for alcohol use. Upon entering Phase I, the defendant will immediately engage in treatment arranged by the treatment provider at this time.

All DUI Court participants receive drug and alcohol treatment from a licensed provider. The treatment mode is determined by the results of the assessment and the client's prior treatment experiences. Treatment may include, but is not limited to: outpatient, intensive outpatient, outpatient partial hospitalization, residential partial hospitalization, halfway house, and inpatient (short, moderate, or long term). Providers may charge client fees for services based on their income, however, DUI Treatment Court participants will not be refused due to an inability to pay. Furthermore, DUI Treatment Court does accept participants assessed with dual diagnosis drug and psychiatric disorders.

Court sessions are held bi-weekly in open court to monitor a defendant's participation and progress in the DUI Treatment Court Program. At this time, any alterations to case management and treatment plans are reviewed with the defendant. Sanctions (e.g. increased supervision, weekend incarceration) and incentives (e.g. applause, travel permission) are also distributed during Drug Court sessions.

York County recently received an expansion grant for the DUI Court program and is hoping to increase DUI Court capacity to 400, as well as streamline the referral process through central booking.

### Drug Treatment Court

The **York County Adult Drug Treatment Court (DTC)** offers a three phase substance abuse treatment program as an alternative to incarceration for addicted non-violent offenders. Participants are required to comply with treatment, seek employment, and complete community service as part of the program. The expected length of participation in the Drug Treatment Court Program is 12 months. However, this depends on the participant's ability to achieve program goals and remain drug free. The team reserves the right to review anyone's case that exceeds 24 months and decide if the participant remains appropriate for the program.

All defendants eligible for the York County Drug Treatment Court program are assessed by the York/Adams Drug and Alcohol administrative case manager to determine if they meet the standards for drug dependence as outlined in the DSM-IV criteria. Two diagnostic instruments are currently used: The B-DAP Adult Assessment Tool, and the Pennsylvania Client Placement Criteria (PCPC).

Defendants accepted into the Drug Treatment Court program first complete an orientation. The purpose of the orientation is to ensure that defendants understand program requirements prior to plea and formal admission into the program. All Defendants must meet with their attorney prior to their plea into the program to ensure the defendants are aware of their legal rights. Upon completion of the drug/alcohol evaluation and the orientation, a conditional order is completed to modify the defendant's bail to the conditions of Drug Treatment Court. He/she will then begin reporting to Drug Court sessions and will be assigned a probation officer to begin working on phase requirements. Drug Treatment Court sessions are held twice daily on Thursdays at 11:00am and 4:30pm.

In addition to the three problem solving courts, York County operates an **Accelerated Rehabilitated Disposition (ARD)** program for first time DUI offenders. This program serves approximately 1200 individuals each year; with a current success rate of 80% (i.e. 80% of program participants have not acquired new charges after ARD).

➤ **Identified Gaps**

- Treatment courts (100 people represented 5% of total cases)
- Need to have front door staff to divert --- The warden explained that it looks like more staff/cost but saves money and resources in the long run
- Lack of consistent definition of Serious Mental Illness (SMI)
- Inmates lose Medical Assistance (MA) quickly
- The county has a trained forensic certified peer support specialist but not an agency that can get her paid to go into the jail
- MH/MR Intensive Case Management (ICM) goes into the jail only if they know that their clients are in jail
- 2nd or 3rd in number of DUI offenses per capita for PA – about a third of all offenses in the county are DUI
- Broad range of co-occurring issues
- Are MH evaluations happening? How many? All court ordered need is higher

➤ **Identified Opportunities**

- Planning has begun for a Veterans Problem Solving Court in York County
- ½ DUI's are going through ARD and 80% success rate
- Consultants from Wellspan can go into jail – evaluation for what is needed when leaving jail
- The jail is working on instituting up to 30 days of paid medication when released
- York County Mental Health Court (35 cap and 25 currently enrolled)
- Three peer support programs with two program funded
- Therapeutic community in the jail (voluntary)
- Looking into York County College coming into the jail to evaluate the program's success
- Jail is looking into other MH programs – outpatient program
- In planning for a central booking for just DUI's
- Jail gives out resource book to inmates
- NAMI – “In Own Voice” training in the jail

## Intercept IV: Re-Entry

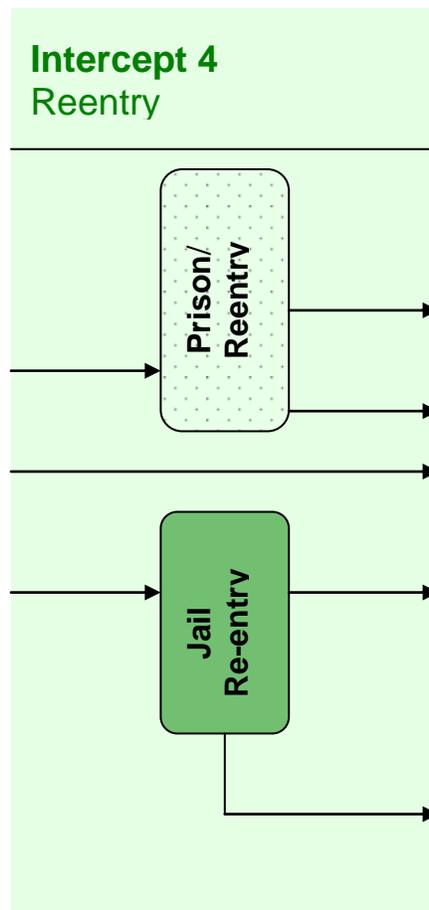
### Re-Entry Services

York County Prison (YCP) has a **Re-Entry Office** with two counselors and one supervisor specifically assigned to the task of preparing inmates for reintegration into the community. This service is made possible by the inmate welfare fund. Re-Entry Office services include assistance with: housing, food, employment applications, resume writing, medication accessibility, MA benefits linkage, personal finances, etc.

In addition, York County Prison operates a **Work Release Program**. The goal of this program is to allow inmates to maintain their employment while serving their sentence, or to allow inmates to secure employment while in YCP in order to fulfill a Domestic Relations order or to accept a new job offer.

In order to be able to apply or qualify for Work Release, a person must be sentenced on all charges. The following are eligibility criteria's that are considered when approving or disapproving an individual for Work Release:

1. Criminal charges- Any charge of violent or sexual nature will be an automatic "not recommended due to charge", and a possible "not recommended" overall.
2. Past criminal history – A past criminal history of violent or sexual offenses, along with open or pending charges will contribute to a denial of the work release application. If current reason for incarceration is a probation violation (PV), the decision for approval/disapproval is based on the original charge (For example: A PV with the original charge of Simple Assault would be treated as Simple Assault).
3. Past work history – Lack of prior legal employment will be cited as a negative factor. If an individual has no tax/work history or has been working in an "under the table" manner, he/she will not be recommended for work release.
4. Legitimacy of employment offer – The employer will need to be informed of the individual's placement on work release and agree to work with the prison in notification of any factors as needed. As a payroll employer, payroll and insurance information may need to be given to YCP. All employers have the right to deny an individual's work release status. In addition, the prison will not recommend someone becoming either the first employee or the first payroll employee of a business.
5. Dependable transportation to and from work - A work release inmate may drive himself or herself to and from employment if they provide staff with proof of current license, insurance, and registration. There is a 2-mile walking distance limit for individuals to walk to and from work. A pedal bike may be used up to 5 miles from YCP, but the individual would need major medical insurance along with all safety equipment. The following means



of transportation are not allowed at this time (1) York area taxi service due to unreliability of service, and (2) Rabbit Transit bus service because of limited direct routes.

6. Current and past behavioral adjustment at YCP – Past disciplinary reports and any past failure to complete the Work Release Program will be cited in future applications.

7. Self- Employment – This is allowed by YCP, but the individual must have a past self-employment tax history. If the business has not been established long enough to have a tax history, the application will not be recommended. Tax filings done in a manner to catch-up prior to serving prison sentence will be treated the same as a lack of history.

The prison also has a relationship with **Harrisburg Area Community College (HACC)** that allows inmates to enroll in HV/AC Repair or Culinary skills courses. These individuals are then able to graduate with a certification.

Lastly, the **Pennsylvania Department of Corrections** has a re-entry program pilot site in York County. This was the first pilot site of its kind and serves as a “pre-release center” for York County residents returning from State Prison. Inmates in this program are eligible for consideration for the work release and HACC programming.

Individuals leave York County Prison with a prescription for 30 days of psychotropic medication.

➤ **Identified Gaps**

- Psych evaluation can take 3 to 4 months for prisoners leaving the jail
- State DOC and York County were in plans to create a reentry court but progress has been slow due to numerous factors on varying levels
- Formulary disconnects
- Integrated healthcare not available

➤ **Identified Opportunities**

- Impressive array of re-entry services in jail (reentry program)
  - 7 positions (1 supervisor & 6 staff members)
  - Work release program
  - HV/AC Repair & Culinary Program
  - Volunteers from St Joes Ministries – groups, mentoring, part of reentry program
- 30 days of psychotropic medication
- Good working relationship with judge and pastor (some diversionary done)
- NAMI recently went into the jail and there is talks about support group and peer to peer mentoring in the future
- Project Alignment - reentry program for woman coming out of prison
- Jail has been successful at getting clothing, education, and not just the continuity of care and housing

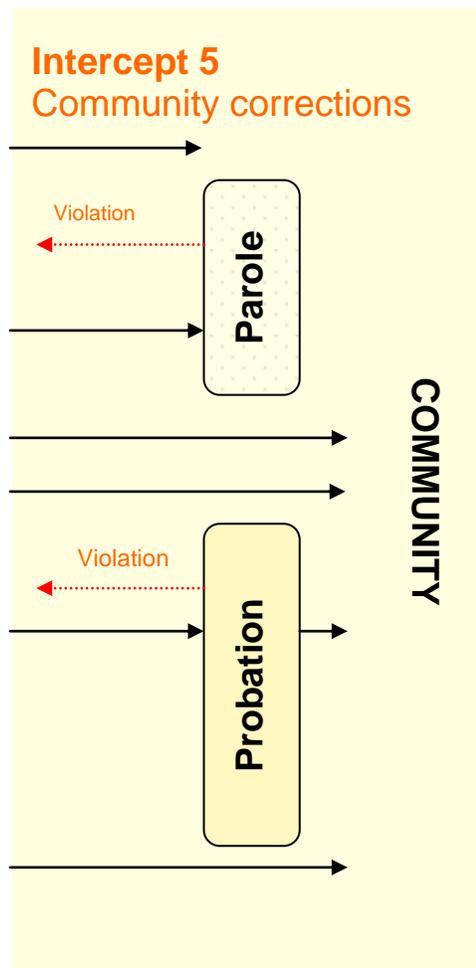
## Intercept V: Community Corrections / Community Support

### York County Adult Probation

**York County Adult Probation** employs 65 probation officers and provides supervision, counseling and casework to adult offenders placed on probation and parole by the Court. Services include case planning, monitoring, and referral to other agencies, where appropriate. Offenders are expected to comply with Court ordered conditions and are returned to Court by staff for violation of conditions when necessary.

Several officers maintain specialized case loads such as:

- **Domestic Violence unit** is comprised of four probation officers who supervise male and female offenders convicted of a domestic violence-related offense where the victim is/was an intimate partner. Such offenses include but are not limited to: Aggravated Assault, Simple Assault, Terroristic Threats, Stalking, Harassment, etc. In addition to these criminal charges, offenders who receive an Indirect Criminal Contempt charge (ICC) due to violating the terms of a Protection from Abuse Order (PFA) are also supervised on this caseload.
- The **Sexual Offenders Unit** was implemented in 1998 to address the treatment and supervision of offenders who are convicted of sex-related crimes. In managing this offender population, this specialized unit comprised of four probation officers utilizes the “containment model” style of supervision that is supported by the Sexual Offenders Assessment Board (SOAB). The Sexual Offenders Unit is responsible for supervising offenders who have committed sexually related offenses in York County as well as inter-county transfer cases where offenders have committed sex offenses in other counties and currently reside in York County. The probation officers work in conjunction with treatment providers in an attempt to protect the community, reduce recidivism rates, and help the offender to recognize his/her offense cycle and work toward identifying more realistic beliefs and healthy behaviors. A typical caseload for a sexual offender officer is 60 individuals.
- The **Mental Health Caseload** was created in 1999 and consists of two officers who work with offenders diagnosed with severe mental illness/mental retardation issues. The typical caseload for a Mental Health officer is 60.



York County Probation also operates a **Day Reporting Center**. This initiative is an Intermediate Punishment program that is an alternative to incarceration. It targets non-violent offenders who would normally receive a long county jail sentence or a short state prison

sentence. In order to be eligible an offender may not have a current conviction or a conviction for a violent offense in the last 10 years, they must meet DSM-IV criteria for dependency and they must fall within levels 3 or 4 according to the Pennsylvania State Sentencing Guidelines. The Day Reporting Center (DRC) provides high accountability through daily reporting, drug screening, curfews, electronic monitoring and employment/community service coupled with appropriate levels of required substance abuse treatment and counseling.

## **Housing**

**Adams-Hanover Counseling Services (AHCS)** operates a **Residential Rehabilitation Program** that is designed to assist adults with persistent mental illness to live in a safe, home-like environment in order to promote independence based on an individual's own potential. This program provides a structured "group home" setting, while providing training in symptom management, interpersonal skills, and daily living skills. The program is a three-step, transitional program with two individual sites (New Dawn and Sunrise), with the Supported Housing Program being the final stage of "transition."

In addition, AHCS runs a **Community Hospital Integration Project Program (CHIPP)**. This program provides stable, community-based housing to adult individuals formerly living in a state hospital setting. The individual receives support and supervision while living in their own apartment. The program is located in three individual clusters in Hanover, York, and McSherrystown.

AHCS also provides an **Assisted Living Program** that currently consists of four 3-bedroom homes located in York, Hanover, and Littlestown. Referrals are received from the CHIPP Program as well as various community resources. The program is staffed with employees who have experience in various levels of psychiatric and direct care. Upon entry to the program, individuals' medical and psychiatric needs will be assessed, addressed, and monitored on a continual basis

The **Atkins House** (founded in 1975), is a residential and outpatient treatment center for women offenders. The Residence houses 15 women placed there by the PA Bureau of Community Corrections. The residential component of Atkins House is a supportive and structured living environment that serves as an alternative to prison as well as a transition from prison to the community. Women work in the community and contribute an average of 65 hours of community service per month.

Individuals housed in the residential program are funded through per diems from the Pennsylvania Department of Corrections, Bureau of Community Corrections. Residents also contribute 25% of their income from employment to room and board. Approximately 40 women complete the program each year, and 82% percent of the women who have successfully complete the Atkins House residential program have not re-offended.

The Atkins house also contains a **Treatment Center** which serves outpatients and provides the various counseling and skill development programs necessary for house residents, women ex-offenders in the community and women incarcerated in York County Prison, to recover.

In addition, HealthChoices offers a **supported independent living apartment program**.

## **Community Resources**

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**Adams-Hanover Counseling Services (AHCS)** operates the **Breaking Barriers Center Drop-in Center (BBC)** where individuals can come together for peer support, social, and recreational activities. The BBC is located at 33 Frederick Street, Hanover, PA 17331.

York County houses three certified peer support providers: **Adams-Hanover Counseling Services**, **Bell Socialization Services**, and **SAM-inc.**

York County residents also have access to an **Assertive Community Treatment (ACT) Team** that provides comprehensive, community-based psychiatric treatment, rehabilitation, and support to persons with serious and persistent mental illness.

➤ **Identified Gaps**

- Have some CIT probation officers trained but have not maintained that contact with York County Probation
- Lack of resources for certain populations
  - Juvenile & developmental disabilities
  - Reentry services for young adults who have been involved in the criminal justice starting at a young age
- York County has a trained forensic peer specialist but has not utilized her forensic peer services
- Increase in number of caseloads for probation while only having two officers to cover the mental health caseload (used to have three officers)
- Office for Vocational Services (OVR) – Where does it fit?
- LACK OF HOUSING
  - Megan’s Law
  - Assaultive
  - Woman and Children
  - Sex Offenders
  - Arson
  - Transitional Age

➤ **Identified Opportunities**

- Family Group Decision Making Model – OCY
- Strong faith-based volunteers (Transport, clothes)
- OVR open to collaboration with the criminal justice system
- Probation has a D&A component (20-40 people)
- ARD - 1,200 cases yearly
- There is a priority for mental health housing (SMH, prison, and EAC)

## York County Priorities

Subsequent to the completion of the *Cross-Systems Mapping* exercise, the assembled stakeholders began to define specific areas of activity that could be mobilized to address the gaps and opportunities identified in the group discussion about the cross-systems map. Listed below are the priority areas identified by the workshop participants and the votes received for each proposed priority.

### **York County Top Priorities**

1. Continuity of care upon release from jail (14 Votes)
  - a. Psychotropic meds
2. Housing for folks (12 Votes)
  - a. Overflow
  - b. Those who don't fit within current housing options
3. Front end expansion prior to incarceration (11 Votes)
  - a. Financing
  - b. Staffing
4. Diversionary Courts (9 Votes)
5. 911 Dispatcher training (7 Votes)
6. Trauma informed care (2 Votes)
7. Forensic Peer Support Across Intercepts (1 Vote)
8. Cultural competency across intercepts (1 Vote)

## York County Action Plan

<b>Priority: Moving Forward</b>			
<b>Objective</b>	<b>Action Step</b>	<b>Who</b>	<b>When</b>
Complete a report summarizing the work of the workshop		COE	
	First draft	COE	10/14
	Send out for review	<u>Alfie</u>	
<b><u>Next CJAB meeting</u></b>			<b><u>November</u></b>

<b>Priority Area 1: Continuity of care upon release from jail</b>			
<b>- Psychotropic Medication</b>			
<b>Work Group: Joel, Michelle, Clare</b>			
<b>Objective</b>	<b>Action Step</b>	<b>Who</b>	<b>When</b>
1.1 Schedule psychiatrist appointment prior to release	<ul style="list-style-type: none"> <li>• Check on ability to make psychiatrist appointment prior to release</li> <li>• Meet with Wellspan and explore possibility of family doctor prescriptions to bridge gap between current 30 day prescription (from jail) and psychiatrist appointment</li> <li>• Identify PCPs that are willing to write these prescriptions</li> <li>• Identify designated physical healthcare provider for individuals re-entering the community</li> <li>• MH/MR contracted jail counselor to schedule appointments?</li> </ul>		
1.2 Explore option of hiring additional	<ul style="list-style-type: none"> <li>• Find out how much is currently being spent on</li> </ul>		

	psychiatrist (through MH/MR?) to conduct forensic evaluations <u>and</u> handle the prescription issue	forensic evaluations <ul style="list-style-type: none"> <li>• Explore the financial possibility of employing a full time psychiatrist</li> </ul>		
1.3	Tele-psychiatry Possibility	<ul style="list-style-type: none"> <li>• Pursue option of linking with psychiatrists in Pittsburgh via tele-conferencing</li> </ul>		
1.4	Expand responsibilities of jail psychiatrist?	<ul style="list-style-type: none"> <li>• Approach jail psychiatrist re: developing an additional contract with behavioral health to write 'gap time' prescriptions in the community</li> </ul>		
1.5	Block scheduling once a month at Wellspan?			
1.6	Explore other provider options (Hanover, PA Counseling, PA comprehensive behavioral health etc.)	<ul style="list-style-type: none"> <li>• Set up meetings with additional providers</li> <li>• Hold 'provider day' meeting to bring local providers together and discuss concerns</li> <li>• Explore contract possibilities</li> </ul>	MH/MR?	
1.7	Look at option of identifying folks who could be managed by primary care physician vs. those who truly need specialized care			

<b>Priority Area 2: Housing</b> - Overflow - Folks that don't fit within available options <b>Work Group:</b>				
Objective	Action Step	Who	When	
2.1	Develop a clearer picture of the housing needs for currently incarcerated population	<ul style="list-style-type: none"> <li>• Identify how many currently incarcerated individuals were homeless prior to arrest</li> <li>• Look at the 10-12 folks currently seeking housing each month (from the jail) and examine the breakdown of mental health and substance use needs</li> <li>• Begin to identify housing needs during intake (develop specific code for 'homeless')</li> <li>• Look at how many parole plans are denied because of lack of housing</li> <li>• Examine specific housing needs of MH Court participants</li> </ul>		
2.2	Utilize Local Housing Options Team (LHOT) and/or Housing Census Group	<ul style="list-style-type: none"> <li>• Approach LHOT about including CJ representation</li> <li>• Incorporate criminal justice representation (jail, probation) into the Housing Census Group in addition to the MH Court Supervisor</li> </ul>		

2.3	Explore additional housing resources/options specifically for individuals returning from incarceration	<ul style="list-style-type: none"> <li>• Meet with faith based groups about housing possibilities</li> <li>• Pathways to Housing</li> <li>• Housing First</li> <li>• Explore Critical Time Intervention Model (EBP out of Columbia University)</li> <li>• Develop relationships with local landlords</li> <li>• Attend November 14<sup>th</sup> – Housing Alliance Conference with workshops specifically around criminal justice population (Harrisburg)                             <ul style="list-style-type: none"> <li>○ Look at Housing Support Team (Erie County Model)</li> <li>○ Landlord work of Allegheny County</li> <li>○ Save the date will go out in the next week or so</li> <li>○ Apply for free registration through MHJAC</li> </ul> </li> </ul>	CoE to send conference information  Joel?	
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<b>Priority Area 3: Develop post arrest strategies (intercept 2)</b> - Financing - Staff <b>Work Group:</b>				
Objective	Action Step	Who	When	
3.1	Expand MDJ education efforts	<ul style="list-style-type: none"> <li>• Continue to educate MDJs re: the supervised bail program</li> <li>• Provide education re: Available D&amp;A Services</li> <li>• Veterans' issues education piece (AOPC program) – begin to identify and divert veterans at this level. Veterans with low level charges would be referred to VJO specialist and assessed</li> <li>• Increase contact with MDJs re: these initiatives</li> </ul>		
3.2	Continue DUI Task	<ul style="list-style-type: none"> <li>• Address lag time between</li> </ul>		

	Force work to prioritize this population	<p>arrest and BAC results</p> <ul style="list-style-type: none"> <li>○ Possibility of officer screening at time of arrest</li> <li>○ File charges upon arrest and amend once results come in</li> <li>● Identify 2<sup>nd</sup> and 3<sup>rd</sup> time offenders early</li> <li>● Explore issue of who should do DUI assessments – independent or provider-related? <ul style="list-style-type: none"> <li>○ Possibility of hiring a ‘mobile assessor’?</li> </ul> </li> <li>● Look at increasing use of SCRAM unit ankle monitors</li> </ul>		
3.3	Mental Health Population strategies	<ul style="list-style-type: none"> <li>● Identify screening tool used by supervised bail (Brief Jail Mental Health Screen?)</li> </ul>		
3.4	Explore option of adding MH and D&A screen at Central Booking	<ul style="list-style-type: none"> <li>● Look at DUI task force model</li> <li>● Brief Jail Mental Health Screen (in folders) for MH</li> <li>● DAS for D&amp;A screening</li> </ul>	CoE to provide additional BJMHS information in report	
3.5	Veteran population identification	<ul style="list-style-type: none"> <li>● Pursue veterans’ issues education for MDJs (AOPC program) – begin to identify and divert veterans at this level. Veterans with low level charges would be referred to VJO specialist and assessed</li> <li>● Screening at supervised bail?</li> </ul>		
3.6	Identify reasons for denial of treatment court programs at the referral level	<ul style="list-style-type: none"> <li>● Mike Stough has looked at this – often offense</li> </ul>		

<b>Priority Area 4: Continued Expansion of Diversionary Courts</b>				
<b>Work Group:</b>				
Objective		Action Step	Who	When
4.1	DUI Court Expansion	<ul style="list-style-type: none"> <li>• Continue efforts</li> <li>• Resource expansion</li> </ul>		
4.2	Develop Veterans Court			
4.3	Expand Drug Court Program (long term)			
4.4	Increase resources available for treatment court participants (particularly as treatment courts expand)	<ul style="list-style-type: none"> <li>• Make sure that MA benefits eligible individuals are getting linked with MA (particularly with the Affordable Healthcare Act coming)                             <ul style="list-style-type: none"> <li>○ Develop a systematic way to help individuals apply for benefits</li> <li>○ COMPASS electronic applications started in the prison</li> <li>○ Communicate with Health Choices (Michelle) if MA benefits eligible individuals are running into tx waitlists</li> </ul> </li> <li>• Explore option of reinvestment dollars</li> </ul>	Jail can improve the application process prior to release	
4.5	Educate Community about the realities and benefits of treatment courts	<ul style="list-style-type: none"> <li>• Newly hired position will be focusing on this</li> <li>• Provide education on the financial benefits of the treatment court model</li> <li>• Continue to host yearly provider days – invite Health Choices (Michelle)</li> </ul>		

**Priority Area 5: Address the issue of the lack of coordination between Dispatch and CIT**

**Work Group: CIT Planning Committee (Kathy Jansen, the Chief, and Rose)**

Objective		Action Step	Who	When
5.1	Develop new training	<ul style="list-style-type: none"><li>• Pursue Miami CIT training model</li></ul>	CoE will provide this information	
5.2	Increase support from high level 911 staff	<ul style="list-style-type: none"><li>• Improve relationship with director of 911</li></ul>		
5.3	Pursue 911 'Ride Along' with law enforcement			

## Conclusion

Participants in the *Cross-Systems Mapping* workshop showed much enthusiasm in working together to improve the continuum of resources available for people with severe mental illness and often co-occurring substance use disorders involved in the York County criminal justice system. York County is poised to tackle a number of critical issues that will greatly improve services for this group. The assembled stakeholders spent time gaining a greater understanding of their shared systems, as well as crafting strategies related to improving the collaborative infrastructure for the group and addressing the gaps and opportunities at each intercept.

Considerable work has already been undertaken to improve services for people with severe mental illness and often co-occurring substance use disorders involved in the York County criminal justice system. Law enforcement training, specialized case management, and jail re-entry programs are some examples of current York County initiatives. York County has also developed some thoughtful data to begin to provide a clearer understanding of the issues being discussed. In addition, exploring more problem solving courts and Crisis Intervention Team Training are promising community efforts that generated a good deal of continued interest during the workshop. Local stakeholders participating in the *Cross-Systems Mapping* were clearly interested in building on current successes to better serve this population.

The expansion of the planning group to tackle the priorities established during the *Cross-Systems Mapping* workshop is an essential next step in a true systems change process. It will be important to create effective working relationships with other groups that did not attend the workshop, including 911, police jurisdictions, local Magisterial District Judges, the District Attorney and Public Defender, Social Security Administration, and local peers. Regular meetings should be held by this larger group to facilitate information sharing, planning, networking, development and coordination of resources, and problem solving.

## Closing

York County is fortunate to have a wide range of stakeholders across the mental health, substance abuse and criminal justice systems that have made significant efforts to understand and support the challenging issues discussed in this workshop. The *Cross-Systems Mapping* workshop gave these stakeholders a chance to develop a coordinated strategy to move forward with the identified priorities.

By reconvening and supporting the work of the group in coming months, it will be possible to maintain the momentum created during the *Cross-Systems Mapping* workshop and build on the creativity and drive of key local stakeholders. The Pennsylvania Mental Health and Justice Center of Excellence hopes to continue its relationship with York County and to observe its progress. Please visit the Pennsylvania Mental Health and Justice Center of Excellence website for more information, [www.pacenterofexcellence.pitt.edu](http://www.pacenterofexcellence.pitt.edu).

## Appendix A: Participant List

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## Appendix B: CIT Data Sheet Statistics

### 3RD QUARTER 2011 CIT STATISTICS

As of Sept. 30, 2011, 55 CIT Data Sheets have been submitted. The following is data on those contacts.

CONSUMER AGE							
12 AND UNDER	TEEN	20'S	30'S	40'S	50'S	60+	UNKNOWN
2	9	9	11	8	7	3	6

NUMBER OF CIT CONTACTS BY OFFICER	CIT DATA SHEETS SUBMITTED
ALSPAUGH	
ALTLAND	
ARCHAMBEAULT	4
AUMAN	2
B. SMITH	
B.SMITH	2
BARRY	
BRADY	1
BRIAR	
BRININGER	2
BRUBAKER	
CAMPO	2
CHIDESTER	1
CLARK	3
CRAIG	1
CULP	
EISENHART	
GARMAN	1
GRAYBILL	1
HARTMAN	
HAZELEY	
HUNCHER	10
J. MILLER	
J.SMITH	2
KELLY	
KULAK	
LANDIS	
LEBO	
LEER	
LENTZ	
LOTIER	2
LUSK	3
MEEKER	2
MOYER	

REINERT	1
RICHEY	1
ROEHM	1
SANGER	
SEFCHICK	4
SNELL	1
STALCUP	2
STRINE	
WALTERSDORFF	
WARD	
YOST	
ZENKOWICH	
ZIMMERMAN	3
ZUMBRUM	1

CIT CONTACTS BY POLICE DEPARTMENT

POLICE DEPARTMENT	NUMBER OF CIT DATA SHEETS
ADULT PROBATION	1
FAIRVIEW TOWNSHIP	2
HANOVER BOROUGH	6
MEMORIAL HOSPITAL	
NEWBERRY TOWNSHIP	2
NORTHEASTERN REGIONAL	4
NORTHERN YORK COUNTY REGIONAL	2
PENN TOWNSHIP	
SHERIFF'S DEPARTMENT	
SOUTHWESTERN REGIONAL	2
SPRING GARDEN	8
SPRINGGETTSBURY	2
WEST MANCHESTER TOWNSHIP	8
WEST YORK BOROUGH	
YORK CITY	15
YORK HOSPITAL	

CONSUMER SEX

MALE	FEMALE
37	18

CONSUMER RACE

CAUCASIAN	AFRICAN AMERICAN	OTHER	HISPANIC
44	5	2	3

NATURE OF CIT CALLS

CALL TYPE	NUMBER
302 WARRANT	6
AMBULANCE DISPATCH	1
CIT OFFICER REQUESTED	0
DELUSIONAL CONSUMER	1
DOMESTIC	5
HARASSMENT	1
INTOXICATED SUBJECT	1
INVESTIGATION	1
MULTIPLE CALLS/HANG UPS TO 911	2
PSYCHIATRIC PROBLEM	3
SUICIDE/HOMICIDE THOUGHTS, THREATS AND/OR ATTEMPTS	21
THEFT FROM MV	1
WELFARE CHECK	13

CRISIS CALLS AND RESPONSE				
CRISIS NOT CALLED	CRISIS WAS CALLED	CRISIS RESPONDED	CRISIS DID NOT RESPOND	UNKNOWN IF CRISIS WAS CALLED
36	18	14	14	1

CONSUMERS UNDER THE INFLUENCE OF DRUGS AND/OR ALCOHOL AT TIME OF CONTACT	
YES	NO
5	50

MENTAL HEALTH HISTORY AND COMPLIANCE WITH MEDICATION		
MENTAL HEALTH HISTORY	MENTAL HEALTH MEDICATIONS PRESCRIBED	COMPLIANT WITH MENTAL HEALTH MEDICATIONS
41 OF 55 CONTACTS REPORTED PRIOR MENTAL HEALTH TREATMENT	37 OF 55 INDIVIDUALS WERE PRESCRIBED MEDICATION	11 OF THE 37 INDIVIDUALS WERE COMPLIANT WITH MEDICATIONS

THREAT ASSESSMENT UPON OFFICER ARRIVAL	
THREAT	NUMBER
Attempt to Harm/Harmed Others	4
None	17
Suicide Attempt	6
Suicide Threat	21
Threat to Others/Homicide Threat	7

WEAPON PRESENT	
YES AND WHAT	NO
5 incidents involved an edged weapon	45 Incidents did not involve a weapon
2 Incident involved possession of a firearm	
1 Incident involved attempted smothering with a blanket	

1 incident involved a plastic baseball bat  
 1 incident involved a hammer

44 contacts involved no injuries to consumers. During 11 contacts, consumers had received injuries prior to the CIT Officer arriving on the scene. Five involved superficial cuts, one was self-inflicted gunshot wound and two medication overdose and one involved minor injuries to a neighbor prior to the officer arriving on scene. Two incidents involved the officer using physical force with no injuries to the officers or the consumer.

Only two incidents involved the use of physical force.

No CIT Officer has been injured during contacts.

METHOD OF TRANSPORTATION

Consumers were transported in 42 instances.

Police/Probation	EMS	Private	Mobile Crisis
26	14	1	1

OUTCOME OF INCIDENT

OUTCOME	Number
Arrest	3
Mobile Crisis Responded/Alternate Mobile Site	10
302 Warrant/Hospitalization/YH Crisis	33
Admitted to the Crisis Diversionary Residence	2
De-escalated and left/Welfare Check	3
Act 147 by Parents	1
Unknown	3