Massachusetts Community Justice Project: Mid-Year Update

(Originally known as the Sequential Intercept Model Project)

December 1, 2016
Summary

The Massachusetts Community Justice Project (originally known as the Sequential Intercept Model Project) is a Massachusetts Trial Court initiative. The Project was developed and realized through the efforts of the Trial Court Task Force on Mental Health and Substance Abuse. This interagency Task Force, chaired by Chief Justice Paula Carey, includes key stakeholders from the Trial Court, Department of Mental Health, Department of Public Health’s Bureau of Substance Abuse Services, the Department of Corrections, Middlesex Sheriff’s Department, and the Committee for Public Counsel Services.

The charge of the Trial Court Task Force on Mental Health and Substance Abuse:

*Individuals and families who suffer from mental health issues or substance use issues often present the court system with its most significant challenges in identifying how best to address the needs of these individuals and families in a compassionate way that also preserves public safety and individual liberties. This Task Force is charged with reviewing how our current system responds to mental health and substance use issues, and those who present with these challenges. Our goals are to identify areas in need and ongoing review. Further, this task force will strive to identify engaged community resources to ensure that this information is readily available to the courts, court clinicians, probation, attorneys, parties and their families. The Task force will also identify those resources that are necessary but unavailable, inaccessible or too few in numbers and inform other branches of government.*

The Task Force recognizes that addressing behavioral health needs is a key component in comprehensive efforts to reduce the risk of justice-system contact, penetration, and recidivism among citizens of the Commonwealth. Connecting justice-involved people (and those at risk of justice-involvement) with community-based treatment and recovery support, as early as possible, improves outcomes and benefits not only the individual, but their family and community as well.

To that end, the Massachusetts Community Justice Project is designed to facilitate effective and sustainable collaborations at the local level between justice system, treatment and recovery support systems, and community agencies. Utilizing *Sequential Intercept Mapping*, the Project seeks to promote recovery for people with mental illness and/or addiction, enhance public safety and support quality of life for all.

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Vision and Mission

In keeping with the vision of the Massachusetts Trial Court to “address critical issues arising from societal needs collaboratively and effectively,” the vision of the Massachusetts Community Justice Project is for communities throughout Massachusetts to collaborate across criminal justice, behavioral health, and human service sectors to promote recovery for people with mental health and/or substance use disorders, enhance public safety, and support quality of life for all.

In step with the Trial Court mission to provide “equal access to justice for all in a safe and dignified environment” and to “utilize best practices in a manner that inspires public trust and confidence,” the mission of the Project is to support the development of lasting solutions, through collaborative planning and action at the community level, which reduce the risk of justice involvement and recidivism among people with mental health and/or substance use disorders.

Goals and Objectives

The goal of the Massachusetts Community Justice Project is to decrease the risk of justice-involvement and recidivism for people with mental illness and/or substance use disorders by:

- increasing community-level collaboration between criminal justice, behavioral health treatment and human service sectors;
- increasing capacity to identify the need for behavioral health treatment and recovery support among justice-involved people; and
- increasing connections to and engagement with treatment and recovery support for justice-involved people with behavioral health needs.

Strategies

In order to achieve the set forth objectives, the Project is:

- implementing cross-systems mapping and action planning workshops using the Sequential Intercept Model;
- providing technical assistance to communities to support collaborative action planning, development and implementation of evidence-based practices; and
- informing stakeholders of needs, barriers, and innovations at the community level, as identified in workshops.
**Framework: The Sequential Intercept Model**

Developed by Mark Munetz, MD, and Patty Griffin, PhD, in conjunction with the Substance Abuse and Mental Health Services Administration’s (SAMHSA) GAINS Center, the Sequential Intercept Model provides a conceptual framework for communities to organize targeted strategies for justice-involved individuals with behavioral health disorders.¹

The model depicts the justice system as a series of points of “interception” at which an intervention can be made to prevent people from entering or penetrating deeper into the criminal justice system.² Points of intercept include:

- Intercept 1: Law Enforcement and Emergency Services
- Intercept 2: Initial Detention and Initial Hearings
- Intercept 3: Jail, Courts, Specialty Courts, Forensic Evaluations, and Forensic Commitments
- Intercept 4: Reentry from Jails, State Prisons, and Forensic Hospitalization
- Intercept 5: Community Corrections (Probation and Parole) and Community Support

The model provides an organizing tool for a discussion on how to best address the behavioral health needs of justice-involved individuals at the local level. Using the model, a community can identify local resources and gaps in services; decide on priorities for change; and develop targeted strategies to increase connections to treatment and recovery support services.

The Massachusetts Community Justice Project is including a discussion of Intercept Zero at every workshop. Intercept Zero encompasses the places in the community where people with mental illness and/or addiction can have their needs identified and be connected with treatment and recovery resources before intersecting with the justice system. Intercept Zero includes (but is not limited to): schools, healthcare providers, mental health treatment providers, homeless shelters, and human service agencies.

In May 2015 the Massachusetts Trial Court hosted a Train-the-Trainer workshop with representatives from the Trial Court, the Department of Public Health’s Bureau of Substance Abuse Services, and the Department of Mental Health. Approximately 20 people were trained to facilitate Sequential Intercept Mapping and Taking Action for Change workshops. A two-day training was given by national experts from the SAMHSA GAINS Center at the Worcester Law Library. Training key people from within Massachusetts was determined to be the most cost effective way to build the capacity to implement workshops statewide.

**Community Justice Workshops: Sequential Intercept Mapping and Action Planning**

Workshops take place in District Court jurisdictions and bring together key local stakeholders for a two-day event. Stakeholders include people in leadership roles from the local justice system, mental health and addiction treatment systems, recovery support and human services agencies. Front-line staff as well as people with lived experience are also at the table and are important contributors.

Typical attendees include:

- **Justice System:** Chiefs of Police; District Attorney and Assistant District Attorneys; Defense Attorneys (CPCS and Bar Advocates); Judges; Probation Chief and Officers; Sheriff and Superintendents; Reentry Coordinators.
- **Crisis Services:** Emergency Medical Services, Mental Health Crisis Programs, Fire Chiefs, and Hospital Emergency Department Medical Director.
- **Behavioral Health Treatment System:** Administrators and Program Directors of Acute Treatment Services (detox); Clinical Stabilization and Transitional Stabilization Services; Residential Treatment; Outpatient Services; and Medication Assisted Treatment providers.
- **Recovery:** People with lived experience; Advocates; Peer Support Providers (including DPH-funded peer support centers and DMH-funded Recovery Learning Community representatives); and Family Support Groups (Learn to Cope and NAMI Chapters).
- **Community Partners:** Veterans Services; Community Coalitions (including DPH-funded Massachusetts Opioid Abuse Prevention Collaboratives and EOHHS-funded Safe and Successful Youth Initiatives); Elected Officials; Housing Professionals; and Faith-based Organizations.
- **Regional State Agency Representatives from:** the Department of Mental Health; the Department of Public Health Bureau of Substance Abuse Services (BSAS); and the Department of Developmental Services.

**Day One: Sequential Intercept Mapping**

The first day of the Workshop helps participants visualize how mental health, substance use disorder, and criminal justice systems intersect within the community. Through a facilitated process, the group
develops a local map based on the *Sequential Intercept Model*. This process delineates: how people with behavioral health disorders move through the justice system and where there are opportunities to connect with treatment and recovery support; where there are unidentified resources in the community; and where there are gaps in practices/policies/services. Evidence-based strategies and best practices for each intercept are described throughout the process to educate and inform stakeholders.

Workshop participants determine areas where immediate steps will effect a more cohesive, integrated approach to service delivery. The final activity of day one is to develop a local set of priorities for change.

**Day Two: Taking Action for Change**

The second day is a half-day action planning meeting. Through interactive, information sharing and collaboration, the gaps in service and priorities from the previous day are addressed. The product is the beginning of a local action plan that encompasses: mutually identified local problems impeding criminal justice diversion and service delivery; best practices to address the identified problems; and action steps and a list of identified staff and agencies who have agreed to pursue them.

Additional benefits of the Workshop include: improved communication among stakeholders about problems, expectations, boundaries, and avenues of information sharing and problem solving; and increased awareness of the need for early identification of behavioral health disorders among justice-involved people.

**Community Justice Workshops in Massachusetts**

Since the fall of 2014, ten Workshops have been conducted in Massachusetts in the District Court jurisdictions of: Quincy, Taunton (juvenile), Springfield, Plymouth, Greenfield, Lawrence, Orange, South Boston (4 court jurisdictions), Pittsfield, Hingham, and Boston Central. These jurisdictions encompass 83 towns and cities across the state and include urban, suburban and rural communities.

Workshops are in development in the Holyoke and Worcester District Court jurisdictions. And workshops have been proposed for the jurisdictions of Lowell, Medford, Lynn, Brockton, Northampton and North Adams.
Priorities for Change

In communities where workshops have already been completed, priorities for change were collaboratively developed. Following are the top 3-5 priorities from each workshop:

Quincy
1. Establish an Advisory Committee to assist in the development of protocols and procedures for the mental health court
2. Enhanced identification of persons with mental health needs post-arrest
3. Develop procedures for communication of information between stakeholders

Plymouth
1. Establish a Crisis Intervention Team program for law enforcement
2. Develop a Community Resource Directory with systems level and client level resources
3. Develop a shared flowchart of case processing

Taunton Juvenile
1. Implement behavioral health screening earlier in the process
2. Increase the amount of services for non-MassHealth kids
3. Cross-training and collaboration between justice and treatment sectors
4. Increase amount of resources/services available for young people during the day (Intensive Outpatient Treatment, sports, vocational, etc.)

Springfield
1. Centralized crisis drop-off center
2. Increased affordable housing stock (tied with above)
3. Cross training systems partners
4. Trauma-informed treatment and sensitivity across systems
5. More bridge funding from jail to community for people without insurance
6. More probation officers
5. More options for crisis other than calling police/Quick and coordinated response to crisis/Law enforcement-crisis response (tied with above)

Greenfield
1. Crisis drop-off center with community navigator
2. Pre/post-arraignment diversion implementation
3. Data collection and utilization
4. Recovery coach expansion; peer support expansion; and peer informed planning and programs (tied with above)
4. Improve emergency room support
4. Employment and work force development (tied with above)

Lawrence
1. Improve medication continuity and management
2. Training for police – CIT, MHFA, community resources
3. Housing and homelessness
4. Improve fast access to treatment in the community
5. Develop a cross-sector Task Force
5. Drop-in crisis center (tied with above)

Orange
1. Increase transportation
2. Increase sober housing for women (tied with above)
3. First responder training
4. Information sharing between agencies
5. Peer support centers
6. Mental Health Court

South Boston, Dorchester, Roxbury, and West Roxbury
1. Information sharing between criminal justice and mental health services and clarification/guidelines on HIPAA
2. Integrate peer support in court processes
3. Model training for interacting with people who live with mental health, substance use disorders, developmental disabilities, traumatic brain injury for all stakeholders - inclusive of trauma-informed care and integrating people with lived experience
4. Develop stakeholder/steering committee
5. Ensure access to services for people deemed incompetent to stand trial

Pittsfield
1. CIT Training and Co-Responder with Police Department
2. Trauma Informed Training and Practices Across Intercepts
3. Peer Recovery Support Center/Services
4. Transitional support services
5. Cross-Sector Coalition/Task Force
6. Sober housing options

Hingham
1. Peer support across intercepts – mental health, addiction, veterans
2. Access to treatment – inpatient psych, outpatient, medication evaluation/management, detox, sober admit
3. Training and resources for Police and Fire/EMS (first responders) – CIT, MHFA, community resources, etc.
4. Coalition/Task Force
5. Reentry case management (post-release) – for sentenced and pre-trial inmates

Boston Central Division
1. Timely access to treatment (including psychiatric treatment, outpatient counseling, acute treatment, medication assisted treatment, residential)
2. Safe and stable housing options
3. Information sharing between sectors
4. More co-responders with law enforcement
5. Issues with MassHealth (e.g., timeframe to reactivate pre/post release from incarceration)
Priority Themes (among top 5 priorities in each region)

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<tr>
<th>Priority Themes</th>
<th>Training</th>
<th>Training/Programming for Law Enforcement</th>
<th>Crisis Drop-Off Center or Services</th>
<th>Develop a Task Force or Coalition</th>
<th>Information Sharing Between Agencies</th>
<th>Increase Treatment or Access to Treatment</th>
<th>Peer Recovery Support Services</th>
<th>More Screening and/or Assessment</th>
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**Action Planning**

Following the day-long mapping workshop, participants come together the following day to begin breaking down the priorities into an action plan. The group splits up into smaller groups, according to the priorities, and uses a template to facilitate the process. The template consists of the following:

<table>
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<tr>
<th>Priority:</th>
<th>Objective What do we want to achieve?</th>
<th>Activities/ Tasks What do we have to do to meet the objective?</th>
<th>Resources What resources are necessary to complete the activity (people, time, space, equipment, $)? Who should be at the table? Is anyone already engaged in this activity?</th>
<th>Timeframe How much time is required for the activity? When can action begin on this activity?</th>
<th>Barriers Are there any potential barriers to consider?</th>
<th>Responsibility Who will take the lead?</th>
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Evaluation

Workshop participants fill out an evaluation on both day one and day two. Plans to evaluate outcomes of each workshop are in process, using the following metrics in each region:

**Short-term Outcomes** (Learning: awareness, knowledge, skills, motivation)

- Increased knowledge among workshop participants of:
  - Gaps and resources in the local system
  - Priorities for intervention
  - Need for cross-sector collaboration
  - Best practices to increase collaboration
  - Mental health, substance use disorders, and trauma in justice-involved population
  - Evidence-based and best practice strategies to identify mental health, substance use disorders, and trauma
  - Local resources for treatment and recovery support
  - Evidence-based and best practice strategies to connect justice-involved people (and/or people in crisis) to treatment and recovery support
- Increased motivation among workshop participants to:
  - Collaborate across sectors
  - Develop and implement policies and practices that enhance collaboration

**Medium-term Outcomes** (Action: behavior, practices, decisions, policies)

- Increased development of policies and use of best practices that enhance collaboration including:
  - Cross-sector coalitions/task forces
  - Cross-sector trainings
  - Interagency agreements (MOU’s)
  - Information sharing policies and protocols
  - Increased consumer involvement
  - Increased boundary spanners and champions identified
- Increased development of policies and use of best practices that assist in the identification of mental health, substance use disorders, and trauma
- Increased development of policies and use of best practices that connect justice-involved (and/or people in crisis) to treatment and recovery support

**Long-term Outcomes** (Consequences: social, economic, environmental, etc.)

- Increase in the number of communities with sustainable cross-sector collaborations
- Increase in the number of people who have their mental health, substance use disorder and trauma needs identified
- Increase in the number of people who are connected to treatment and recovery supports from justice system agencies
Appendices

A. Sample Community Justice Project Workshop Materials
   i. Agenda
   ii. Attendee List
   iii. Day One and Day Two Evaluations
   iv. PowerPoint Presentation

B. Massachusetts Community Justice Project Handout

C. Project Logic Model
Community Justice Workshop
Hingham District Court Jurisdiction

Day One: Sequential Intercept Mapping

Thursday, December 1st 2016
8:30am-4:30pm

Linden Ponds Derby Clubhouse
203 Linden Ponds Way
Hingham, MA

Agenda

8:30  Registration and Networking

9:00  Openings and Overview
     •  Welcome and Introductions
       o  First Justice Heather Bradley, Hingham District Court

     The Sequential Intercept Model
     Begin Cross-Systems Mapping

10:30  Break

10:45  Continue Cross-Systems Mapping

12:00  Lunch
     •  Chief Justice Paul Dawley, District Court, Massachusetts Trial Court

1:00  Continue Cross-Systems Mapping

2:30  Break

2:45  Establishing Priorities

4:00  Wrap Up

4:30  Adjourn
Community Justice Workshop
Hingham District Court Jurisdiction

Day Two: Taking Action for Change

Friday, December 2nd 2016
9:00am-12:00pm

Linden Ponds Derby Clubhouse
203 Linden Ponds Way
Hingham, MA

Agenda

9:00  Greeting

Review

• Day 1 Accomplishments
• Local Priorities
• Keys to Success

Action Planning

10:30  Break

10:45  Next Steps

Summary and Closing

12:00  Adjourn
Community Justice Workshop
Hingham District Court Jurisdiction
December 1st and 2nd 2016
Attendees

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Massachusetts Community Justice Workshop
Day 1: Sequential Intercept Mapping
Participant Feedback and Evaluation

Location: Hingham District Court Jurisdiction  Date: Thursday, December 1\textsuperscript{st} 2016

Directions: Thank you for completing this Participant Feedback & Evaluation Form. Please take the time to answer each question as specifically and candidly as possible.

A. ROLE: What is your role in the community? (circle all that apply)

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<td>Other (specify):</td>
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B. WORKSHOP GOALS - Please rate the extent to which you agree or disagree that today’s workshop met each of its goals.

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<th>Goal</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. This Sequential Intercept Mapping workshop helped identify resources, gaps and duplication in our community.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>2. The workshop provided ample opportunities for networking and information sharing.</td>
<td>1</td>
<td>2</td>
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<td>4</td>
</tr>
<tr>
<td>3. The workshop helped us to determine priorities for change.</td>
<td>1</td>
<td>2</td>
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</tr>
<tr>
<td>4. The workshop emphasized the importance of cross-sector collaboration and the use of best practices.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>
C. OVERALL WORKSHOP – Please rate program aspects

<table>
<thead>
<tr>
<th></th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Overall I am satisfied with the content and quality of the workshop.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>2. The workshop was well organized.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>3. Relevant examples were given during the presentations.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>4. The facilitators demonstrated a high level of expertise on the subject matter presented.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>5. The facilitators were well prepared concerning key issues and needs of the community.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>6. Training materials and resources provided were helpful.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>7. There was representation from key services and decision-makers.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>8. There was opportunity for engagement of all participants, including people with lived experience, mental health, substance use disorder, criminal justice, housing and social service providers.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

D. IMPLEMENTATION - Do you feel your community will be able to successfully action plan following today’s workshop? Why or Why not?
_______________________________________________________________________________________________
_______________________________________________________________________________________________

E. RECOMMENDED CHANGES - What specific changes would you make to improve today’s workshop?
_______________________________________________________________________________________________
_______________________________________________________________________________________________

F. ADDITIONAL COMMENTS
_______________________________________________________________________________________________
_______________________________________________________________________________________________

Thank you very much for completing this form.
Massachusetts Community Justice Workshop  
Day 2: Taking Action for Change  
Participant Feedback and Evaluation

**Location:** Hingham District Court Jurisdiction  
**Date:** Friday, December 2\textsuperscript{nd} 2016

**Directions:** Thank you for completing this Participant Feedback & Evaluation Form. Please take the time to answer each question as specifically and candidly as possible.

<table>
<thead>
<tr>
<th>A. ROLE: What is your role in the community? <em>(circle all that apply)</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>Criminal Justice</td>
</tr>
<tr>
<td>Social Services</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. WORKSHOP GOALS: Please rate the extent to which you agree or disagree that today’s workshop met each of its goals.</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The workshop prepared us to implement systems change.</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<tr>
<td>2. The action plan developed today contains several attainable, low-cost action steps that will likely result in positive changes.</td>
<td>1</td>
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OVER
### C. OVERALL WORKSHOP: Please rate program aspects

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<td>workshop.</td>
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### D. IMPLEMENTATION - Do you feel your community will be able to successfully implement action steps following today’s workshop? Why or Why not?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

### E. RECOMMENDED CHANGES - What specific changes would you make to improve today’s workshop?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

### F. FOLLOW-UP – What specific things can we do (i.e. technical assistance) to help you meet your identified goals?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

### G. ADDITIONAL COMMENTS

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

---

Thank you very much for completing this form.
Sequential Intercept Model

The Basis for Cross-Systems Mapping

Sequential Intercept Model

Mark Munetz, MD and Patty Griffin, PhD (2009)

Key Points of Interception

Five Criminal Justice System Intercepts

Intercept 1
- Law enforcement
- Police
- Hospitals
- Emergency services
- Treatment Providers
- Homeless Shelters
- Healthcare Providers
- Human Services

Intercept 2
- Post-arrest
- Initial detention
- Initial hearings

Intercept 3
- Post-initial hearings
- Jails
- Courts
- Forensic evaluations
- Forensic commitments

Intercept 4
- Re-entry from jails, state prisons and forensic hospitalization
- Community corrections
- Community support

Intercept 5
- Reentry

Illustrates key points to "intercept" to ensure:
- Prompt access to treatment
- Opportunities for diversion
- Timely movement through criminal justice system
- Linkage to community resources

Sequential Intercept Model

Best Practices to Enhance Collaboration

- Cross-System Coalitions/Task Forces
- Communication and Information Sharing
- Boundary Spanners
- Champion
- People with Lived Experience/Advocates at the Table
Creating a Local Map

Best Practices to Enhance Collaboration

Cross-System Coalitions/Task Forces
Communication and Information Sharing
Boundary Spanners
Champion
People with Lived Experience/Advocates at the Table

Wrap - Up

Review
Setting the Stage for Tomorrow
Homework
Wishes & Plusses
Evaluation

Hingham Regional Community Justice Workshop
Day 2: Taking Action for Change
Friday, December 2nd 2016

To Do Today

Review
Action Planning
Next Steps
Workshop Evaluation

Priority

Objectives
What do we want to achieve?

Activities/ Tasks
What do we have to do to meet the objective?

Resources
What resources are necessary to complete the activity? (people, time, space, equipment, $)

Timeframe
How much time is required for the activity?

Barriers
Are there any potential barriers to consider?

Responsibility
Who will take the lead?

Priorities Established Yesterday

1. Peer support across intercepts – mental health, addiction, veterans
2. Access to treatment – inpatient psych, outpatient, medication evaluation/management, detox, sober admit
3. Training and resources for Police and Fire/EMS (first responders) – CIT, MHFA, community resources, etc.
4. Coalition/Task Force
5. Reentry case management (post-release) – for sentenced and pre-trial inmates
Marisa Hebble, MPH
Coordinator
Massachusetts Community Justice Project
Executive Office of the Trial Court
617.351.4419
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Ben Cluff, MPA, LADCI, CADC
Veterans Services Coordinator
Bureau of Substance Abuse Services
Department of Public Health
413.594.7125 ext. 3136
ben.cluff@state.ma.us

Annamarie Galvin
Substance Abuse Prevention Coordinator
Scituate FACTS Coalition
South Shore Peer Recovery
scituatefacts@gmail.com

Please remember to fill out the evaluation and drop off your name tag before you leave.
The Massachusetts Community Justice Project is an initiative of the Massachusetts Trial Court, in collaboration with the Department of Mental Health and the Department of Public Health: Bureau of Substance Abuse Services. The Project facilitates collaborations between the courts, criminal justice partners, and behavioral health treatment systems. Using Sequential Intercept Mapping* and collaborative action planning, the Project seeks to promote recovery for people with mental illness and/or substance use disorders, enhance public safety and support quality of life for all.

The goal of the Project is to decrease the risk of justice-involvement and recidivism for people with mental illness and/or substance use disorders by:

- increasing community-level collaboration between criminal justice, behavioral health treatment, and human service sectors;
- increasing capacity to identify the need for behavioral health treatment and recovery support among justice-involved people; and
- increasing connections to and engagement with treatment and recovery support for justice-involved people with behavioral health needs.

To facilitate effective collaborations at the community level, the Community Justice Project Coordinator works with a planning group in each community/region to implement Sequential Intercept Mapping and Taking Action for Change workshops:

**Day One: Sequential Intercept Mapping Workshop**

**Creating a Local Cross-Systems Map**

- This one-day workshop helps participants visualize how mental health, substance use disorder, and criminal justice systems intersect within the community.
- The workshop brings together key stakeholders to tap into the specific local expertise necessary to develop a local map, based on the Sequential Intercept Model, developed by the SAMHSA Gains Center, operated by Policy Research Associates.**
- Stakeholders identify opportunities and resources for diverting people with mental illness and/or substance use disorders out of the justice system and connecting them with appropriate treatment and support services. Gaps in services, duplication of services, or areas where different providers are working at cross purposes are also identified.

**Priorities for Change**

- Workshop participants determine areas where immediate steps will effect a more cohesive, integrated approach to service delivery. The final activity of the workshop is to develop a local set of priorities for change.

**Additional Benefits**

- Improved communication among stakeholders about problems, expectations, boundaries, and avenues of information sharing and problem solving; and serves as a key step towards increasing collaboration.
- Improved early identification of people with behavioral health disorders coming into contact with the criminal justice system; increases effective service linkage; reduces the likelihood of recycling through the criminal justice system; enhances community safety; and improves quality of life.

[OVER]
Workshop Participants:
- Criminal justice system professionals (police, dispatch, probation, judges, court administrators, court personnel, pre-trial services, attorneys for prosecution and defense, sheriffs, jail personnel, community corrections, jail diversion programs, and more)
- Mental health and substance use disorder professionals (psychiatrists, physicians, psychologists, social workers, supervisors, program managers, administrators, hospital emergency services, case managers, and others)
- Appropriate regional representatives of agencies which fund the above services
- People with lived experience with mental health/substance use challenges and/or criminal justice exposure and their families
- State agency representatives, veterans services, social service agencies, community coalition representatives and more

Day Two: Taking Action for Change Workshop

Facilitated Action Planning
- Day two is an additional, optional, half-day action planning workshop that immediately follows a Sequential Intercept Mapping workshop involving the same group of key stakeholders
- This interactive, information sharing, collaborative activity addresses the identified gaps in service and the priorities established in the Sequential Intercept Mapping workshop
- The action plan addresses gaps through attainable, low-cost, prioritized action steps

A Local Action Plan
- The product of this segment is a local action plan that addresses:
  - Mutually identified local problems impeding criminal justice diversion and service delivery
  - Best practices to address the identified problems
  - Action steps and a list of identified staff and agencies who have agreed to pursue them

For more information contact the Project Coordinator:
Marisa Hebble, MPH
Executive Office of the Trial Court
One Pemberton Square
Boston, MA 02108
marisa.hebble@jud.state.ma.us
857.350.0467


**For more information on the Sequential Intercept Model and Taking Action for Change workshops visit Policy Research Associates online at prainc.com.

Massachusetts Community Justice Project

Using Sequential Intercept Mapping to help communities address the behavioral health needs of people who come into contact with the criminal justice system
**Massachusetts Community Justice Project**

**Vision:** In keeping with the vision of the Massachusetts Trial Court to “address critical issues arising from societal needs collaboratively and effectively,” the vision of the Community Justice Project is for communities throughout Massachusetts to collaborate across criminal justice, behavioral health, and human service sectors to promote recovery for people with mental health and/or substance use disorders, enhance public safety, and support quality of life for all.

**Mission:** In step with the Trial Court mission to provide “equal access to justice for all in a safe and dignified environment” and to “utilize best practices in a manner that inspires public trust and confidence,” the mission of the Community Justice Project is to support the development of lasting solutions through collaborative planning and action at the community level, which reduce the risk of justice involvement and recidivism among people with mental health and/or substance use disorders.

---

**Goal:** Decrease the risk of justice-involvement and recidivism for people with mental health and/or substance use disorders

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Activities</th>
<th>Outputs</th>
<th>Outcomes</th>
<th>Long Term Consequences: social, economic, environmental etc.</th>
<th>Indicator/Data Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specific, Measurable, Achievable, Relevant, and Time-bound</td>
<td>Tangible and direct products of activities that lead to desired outcomes</td>
<td>Short: Learning: awareness, knowledge, skills, motivations</td>
<td>Outcomes: Increase; Long: Consequences:</td>
<td>Indicators we look for to measure implementation, progress and success</td>
<td></td>
</tr>
<tr>
<td><strong>Priority Objective:</strong> Increase community-level cross-systems collaboration among criminal justice, behavioral health treatment, and human service sectors</td>
<td>Implement cross-systems mapping and action planning workshops using the Sequential Intercept Model</td>
<td>Workshop participants will increase knowledge of:</td>
<td>Increase in the number of communities with sustainable cross-sector collaborations</td>
<td># of SIM workshop participants who indicate increased knowledge and motivation of short-term objectives</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Provide technical assistance to communities to support collaborative action planning and implementation of evidence-based and promising practices and policies</td>
<td>Systematic and cross-sector collaboration</td>
<td></td>
<td># of communities who develop cross-sector coalitions</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>Best practices to increase collaboration</td>
<td></td>
<td># of cross-sector trainings</td>
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<td># of interagency agreements developed (MOU’s)</td>
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<td></td>
<td></td>
<td></td>
<td># of information sharing policies and protocols developed/implemented</td>
<td></td>
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<tr>
<td></td>
<td>Implement cross-systems mapping and action planning workshops using the Sequential Intercept Model</td>
<td>Workshop participants will increase motivation to:</td>
<td></td>
<td># of communities incorporating consumers in efforts</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Collaborate across sectors</td>
<td></td>
<td># of communities with identified boundary spanners and champions</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Develop and implement policies and practices that enhance collaboration</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Increase capacity to identify the need for mental health and/or substance use disorder treatment and recovery support for justice-involved people and people at risk of justice involvement.</td>
<td>Increase knowledge of:</td>
<td>Increase in the number of people who have their mental health, substance use disorder and trauma needs identified</td>
<td></td>
<td># of workshop participants who indicate increased knowledge of trauma, mental health, and substance use disorders among justice involved people as well as best practices to identify needs</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mental health, substance use disorders, and trauma in justice-involved population</td>
<td></td>
<td></td>
<td># of communities who provide trainings on mental health, substance use disorders, and trauma</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Evidence-based and best practice strategies to identify mental health, substance use disorders, and trauma</td>
<td></td>
<td></td>
<td># of communities who implement use of screening/assessment tools</td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
<td></td>
<td># of people screened by intercepts who utilize screening/assessment tools</td>
<td></td>
</tr>
<tr>
<td>Increase connections to and engagement with treatment and recovery support services for justice-involved persons with mental health and/or substance use disorders</td>
<td>Increase knowledge of:</td>
<td></td>
<td></td>
<td># of workshop participants who report increased knowledge of local resources and best practices for connecting people to treatment</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Local resources for treatment and recovery support</td>
<td></td>
<td></td>
<td># of communities who implement policies/protocols and best-practices to connect people to treatment/recovery support from justice agencies</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Evidence-based and best practice strategies to connect justice-involved people (and/or people in crisis) to treatment and recovery support</td>
<td></td>
<td></td>
<td># of people referred to community-based treatment and/or recovery support by intercepts</td>
<td></td>
</tr>
</tbody>
</table>

**Indicators:**
- # of SIM workshop participants who indicate increased knowledge and motivation of short-term objectives
- # of communities who develop cross-sector coalitions
- # of cross-sector trainings
- # of interagency agreements developed (MOU’s)
- # of information sharing policies and protocols developed/implemented
- # of communities incorporating consumers in efforts
- # of communities with identified boundary spanners and champions

**Sectors:**
- Justice Partners: Law Enforcement, Court Personnel, District Attorneys, Prosecutors, Defense Attorneys, CPCS, Specialty Courts, Sheriffs, Houses of Corrections, Offices of Community Corrections, Probation and Parole
- Behavioral Health: DMH, DPH-BSAS, Local Treatment Providers of MH and/or SUD, Recovery Support
- Crisis: Emergency Service Provider, EMT’s, Emergency Departments
- Other: Consumers, Consumer Advocates, Center of Excellence for Specialty Courts, Housing and Homeless Agencies, Veterans Services, Community Coalitions

**DRAFT**