

BEHAVIORAL HEALTH COURT UPDATE

Department of Research and Evaluation

March 2016

Behavioral Health Treatment Court Collaborative

The Goals and objectives of our program are to provide the wrap around services needed to individuals that are criminal justice involved and have mental health, addiction and co-occurring disorders. This project also has a goal of engaging veterans that are criminal justice involved and providing them with alternatives to incarceration. The process for providing these services includes implementing Evidence Based Practices and providing these services to participants through a partnership between the 31st Judicial District court and Volunteer Behavioral Health.

We have amended our screening process to use the URICA and the AD-COD Assessment tools at initial screening for eligibility for the program. Upon acceptance into the program we are implementing the Life Events Checklist and subsequently the PTSD check list, when the Life Events Check List indicates a history of trauma. Those individuals whose screening indicates a history of trauma are referred to trauma focused treatment within the services or our treatment provider.

Our goals also include providing case management at two levels. Each individual is assigned a case manager through the treatment provider. Additionally, the services and experience of two peer case managers at the court become increasingly available to the participants as they progress through the stages of the program with primary case management shifting to the Certified Peer Specialists during the final phase of the program.

Highlights from February

- ◆ There are 67 active participants.
- ◆ The program has graduated 91 participants.
- ◆ 82% of participants are being supported through grant funds.
- ◆ The program contains 47 males and 20 females.
- ◆ There are currently 30 participants listed as phase 1, 18 participants listed at phase 2, and 19 participants listed as phase 3.



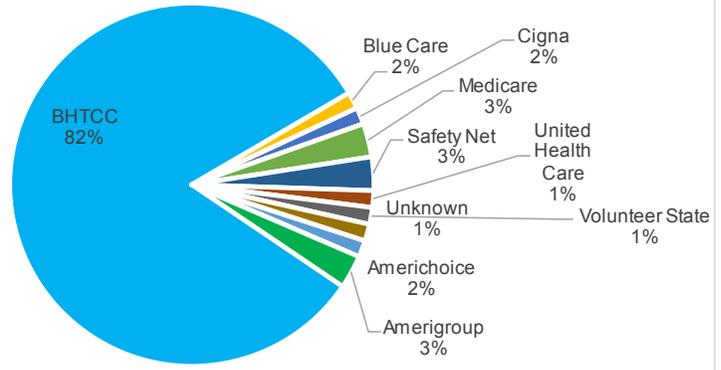
Challenges

There are several challenges present including development for an alternative payment method for participants. A visual shows that currently 82% of participants are being supported through grant funds. The goal is to find alternative funding sources for uninsured participants, and enrolling them in the Affordable Care Act to obtain insurance when possible. This issue is a work in progress, and the number of cases paid by grant funds are expected to decline.

Technology challenges have also presented. We continue to have issues with the Common Data Platform due to the conversion from SAIS and program staff's ability to access the new system. The program has been notified by SAMHSA that CDP is closed and alternatives for data are forthcoming.

Even with challenges present, there are multiple parts of the program that continue to thrive.

PAYEE MIX



Drug of Abuse

Another important part of the program is capturing participants' "drug of abuse". The top drugs of abuse are alcohol and methamphetamine at 31% followed by narcotics at 16%.

By capturing the participant's drug of abuse the therapists, case managers, and others are able to aid the participant's recovery by offering the most effective treatment. This is also important when looking at the program outcomes. By capturing the drug of choice for participants who graduate and were terminated, we are able to see any trend development that could impact graduation rates for participants.

Active Participants - Drug of Abuse

