

CHRONIC CONSUMER STABILIZATION INITIATIVE

A MULTI-AGENCY COLLABORATION



DEMOGRAPHICS

- ▣ 4th largest city in the United States
- ▣ 2.3 million residents
- ▣ At 634 square miles, the City of Houston could contain the cities of New York, Washington, Boston, San Francisco, Seattle, Minneapolis and Miami



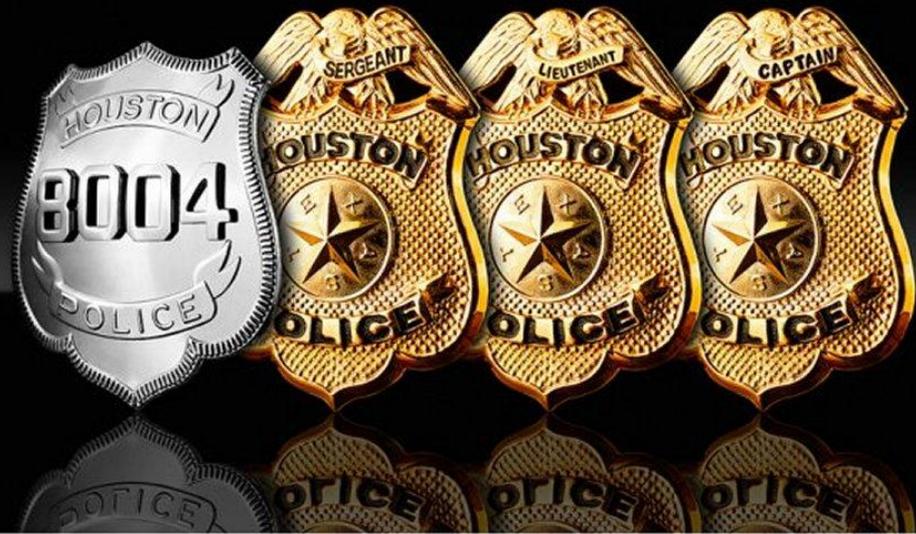
HOUSTON POLICE DEPARTMENT

LARGEST POLICE
DEPARTMENT IN
TEXAS

OVER 5,300
CLASSIFIED
EMPLOYEES

OVER 1,800 CIVILIAN
EMPLOYEES

Worn **PROUDLY**



DESIGN BY QJOC TUAN NGUYEN, 2007



WHAT IS CCSI ?

- ▣ The Chronic Consumer Stabilization Initiative (CCSI) is a collaborative effort between the Houston Police Department, The Mental Health Mental Retardation Authority of Harris County (MHMRA) and The City of Houston Health and Human Services
- ▣ CCSI was designed to *proactively* identify, engage, and provide services to individuals who have been diagnosed with serious and persistent mental illness *and* who have had frequent encounters with the Houston Police Department



SCANNING

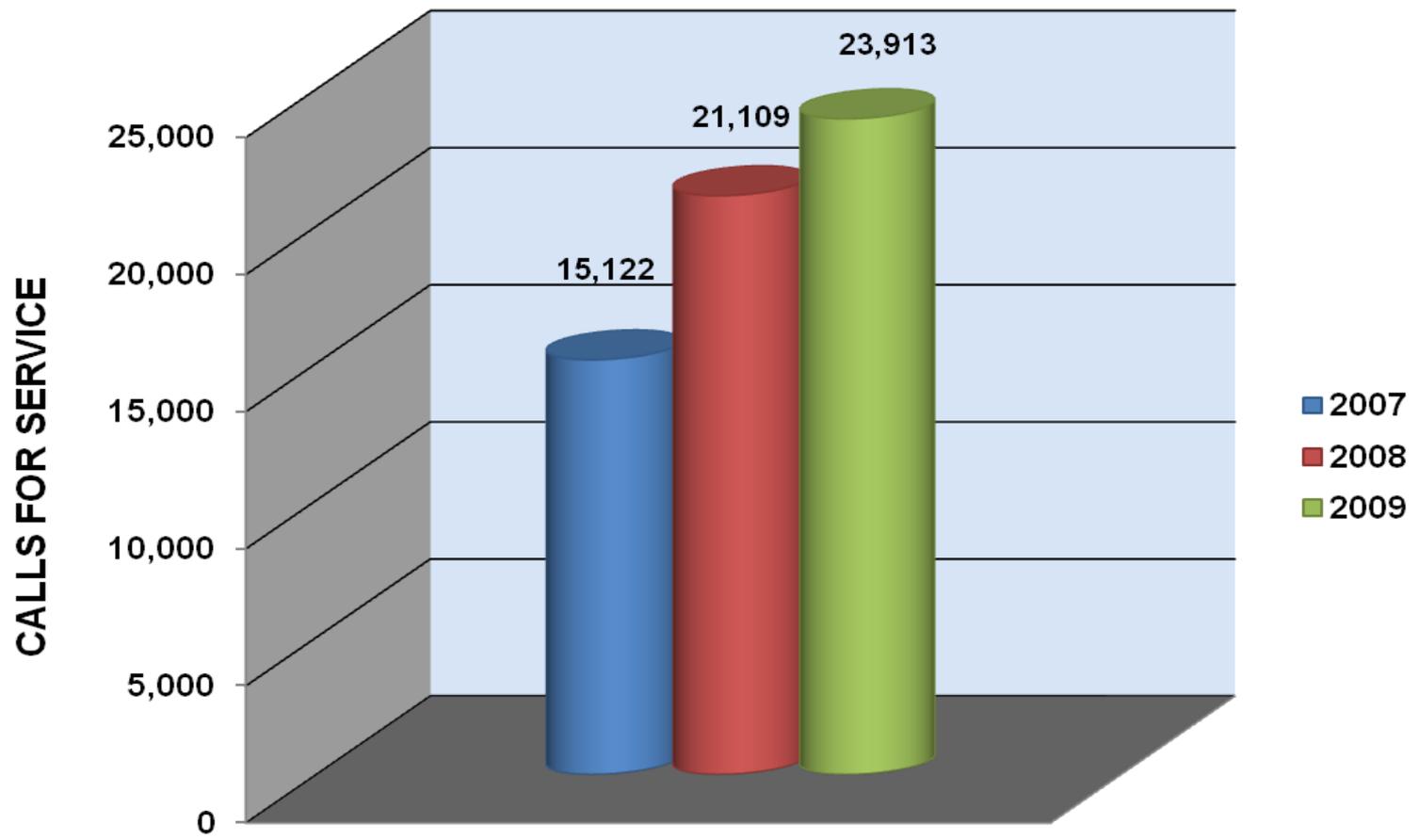


WHY WAS CCSI NEEDED ?

- ▣ Encounters between police and persons with serious mental illness continue to increase at alarming rates across the United States
- ▣ These are some of the most difficult, potentially dangerous, time consuming and litigious calls law enforcement officers respond to



INCREASED CALLS



C.I.T. INCIDENTS PER YEAR



Approximately half of our SWAT calls involve a person in a mental health crisis. This trend is occurring nationwide



Nationally, it is estimated that 10% of all police calls involve a person in a mental health crisis



DEADLY ENCOUNTER

May 6, 2007

42 year-old female with
history of schizophrenia

History of trespassing at
police headquarters

Made claims of laser beams
being shot through her head,
food being poisoned

Numerous hospitalizations
for mental illness

Entered police headquarters
with knife, stabbing herself in
head while screaming for
officers to kill her



DEADLY ENCOUNTER

July 21, 2007

39 year-old male with lengthy
history of schizophrenia

Detained and committed by HPD
3 times in prior year

Just released from HCPC 1 week
prior to fatal encounter with
police

Stopped taking medication,
deteriorated

Mother called 911 after being
turned away by HCPC

Charged officers with pipe and
told them "Shoot me"



ANALYSIS



Dedication
Houston Police Department



ANALYSIS

- ▣ Mental Health Task Force formed in September 2007
- ▣ Task force comprised of law enforcement, community leaders, and mental health advocates
- ▣ Goal was to closely examine recent deadly encounters and identify possible solutions
- ▣ Met three times over a six week period



ANALYSIS

- ▣ EACH CASE EXAMINED HAD TWO THINGS IN COMMON:
 - ▣ 1. Each of the individuals had lengthy history of severe and persistent mental illness
 - ▣ 2. Each individual had extensive history of prior contact with police due to their illness



ANALYSIS

- ▣ TASK FORCE RECOMMENDATIONS:

- ▣ 1. Identify 30 most chronically mentally ill with highest number of police contacts

- ▣ 2. Assign these 30 individuals to two mental health caseworkers for intensive supervision

- ▣ 3. Add mental health screening to 911 dispatch protocol



METHODS OF ANALYSIS

- ▣ Houston Police Department offense reports (MHU reviews over 1,000 offense reports monthly)
- ▣ Mental Health Unit database statistics on persons requiring repeat Emergency Detention Orders (HPD averages 300 EDO's monthly)
- ▣ Dispatch statistics on chronically mentally ill with frequent calls to 911



METHODS OF ANALYSIS

- ▣ Interviews with family members to examine clinical and community support (or lack thereof) in incidents that resulted in a fatal encounter with police
- ▣ Site-based interviews (conducted by a public health nurse, social worker, and police officer) with personal care home locations having a history of excessive calls for law enforcement



RESPONSE



- ❑ The Chronic Consumer Stabilization Initiative began as a six month Pilot Program: February 15, 2009 through August 15, 2009
- ❑ Two Case Managers were hired & trained by MHMRA and funded by the City of Houston Health & Human Services
- ❑ Staff were responsible for engaging and interacting with thirty (30) of the most chronic and problematic consumers identified by the Houston Police Department's Mental Health Unit; priority was based on the number of interactions with police officers within the last calendar year



PROGRAM GOALS

- ❑ Reduce the number of interactions with the Houston Police Department
- ❑ Identify unmet needs and barriers in the community
- ❑ Link and coordinate clients with needed mental health treatment and psychosocial services
- ❑ Provide support and education to the individual and their family members



- ❑ Once identified, each Case Manager worked diligently to engage 15 individuals who met the criteria for this program
- ❑ Data was entered into and collected through 2 data systems: HPD Data Base and MHMRA Services Data Base
- ❑ Bi-weekly meetings were held between the case managers and the Mental Health Unit to discuss their progress, problems encountered, and other barriers or issues that needed to be resolved
- ❑ Administrative oversight meetings were held between HPD, City of Houston Health and Human Services Department and MHMRA Of Harris County, on a monthly basis



CHRONIC CONSUMER STABILIZATION INITIATIVE

OPEN DATE



CCSI #

8

CURRENT STATUS

OPEN

CASE MANAGER

CLOSING DISPOSITION

LAST NAME

SOCIAL SECURITY NUMBER

MHMRA

0

FIRST NAME

DATE OF BIRTH

AGE:

FBI

MIDDLE NAME

TDL/ID

0

SEX:

RACE:

SID

ADDRESS

0

STREET

ZIP CODE

PHONE NUMBER

MENTAL HEALTH HISTORY

CRIMINAL HISTORY

NOTES:

FAMILY RELATIVE:

NAME:

ADDRESS #1:

PHONE NUMBER

CLOSE DATE



CHRONIC CONSUMER STABILIZATION INITIATIVE

LAST NAME	FIRST NAME	DATE OF BIRTH	CURRENT STATUS
	ANGELA	12/15/1970	OPEN

INCIDENT#	DATE:	OFFENSE	DISPOSITION
062810210	5/2/2010	ASSAULT	ORI

CONSUMER GOT INTO AN ARGUMENT AND A FIGHT WITH ANOTHER RESIDENT AND STATED SHE WAS DEPRESSED, BUT DID NOT WANT TO HARM HERSELF OR OTHERS AND WAS LEFT AT THE SCENE.

LAST NAME	FIRST NAME	DATE OF BIRTH	CURRENT STATUS
	JAMES	8/29/1987	OPEN

INCIDENT#	DATE:	OFFENSE	DISPOSITION
034366910	3/10/2010	INVESTIGATION MENTAL ILLNESS	EDO-NPC

CONSUMER HAD THOUGHTS OF SUICIDE AND SUFFERS FROM DEPRESSION

LAST NAME	FIRST NAME	DATE OF BIRTH	CURRENT STATUS
	JAMES	8/29/1987	OPEN

INCIDENT#	DATE:	OFFENSE	DISPOSITION
073600810	5/22/2010	CLASS C THEFT	EDO-NPC

CONSUMER WAS OFF HIS MEDICATION AND WAS CAUGHT SHOP LIFTING AT CVS.

LAST NAME	FIRST NAME	DATE OF BIRTH	CURRENT STATUS
	BRANDON	4/9/1988	OPEN

INCIDENT#	DATE:	OFFENSE	DISPOSITION
003428610	1/9/2010	THREAT	EDO-NPC

CONSUMER BELIEVED HER HUSBAND HAD LEPROSY AND WAS SPREADING IT AROUND AFTER CATCHING IT FROM PROSTITUTES

LAST NAME	FIRST NAME	DATE OF BIRTH	CURRENT STATUS
	BRANDON	4/9/1988	OPEN

INCIDENT#	DATE:	OFFENSE	DISPOSITION
005148410	1/12/2010	INVESTIGATION METNAL ILLNESS	EDO-NPC

CONSUMER STATED HE WANTED TO KILL HIM SELF



ELIGIBILITY CRITERIA

- ▣ Three (3) or more admissions to the Neuropsychiatric Center (NPC) by Houston Police Department (HPD). NPC is a psychiatric emergency room
- ▣ Excessive and high frequency of phone calls made to HPD by clients or others, on their behalf
- ▣ High frequency of contact with HPD
- ▣ High utilizers of City of Houston services



REFERRAL PROCESS

- ▣ Referrals came from a list of clients generated through the Houston Police Department Mental Health Unit's statistical database
- ▣ Clients were prioritized based on number of interactions with police, with the highest priority given to the highest number of calls received by HPD over the last year
- ▣ Consumers selected for CCSI averaged 1 emergency mental health commitment per month within the previous 6 months. The most chronic consumer selected had 10 commitments in the previous 6 months



STAFFING

- ▣ Direct Care Staff:
 - One Master level case manager with approximately 30 years of Case Management experience
 - One bilingual (Spanish speaking) case manager with approximately 8 years of Case Management experience

- ▣ HPD Mental Health Unit Liaison Officer

- ▣ Administrative oversight provided by Assistant Deputy for CPEP services & the Lieutenant for the HPD Mental Health Unit



SERVICES PROVIDED

- ▣ Crisis Intervention and Relapse Prevention
- ▣ Screening and assessment
- ▣ Case management & psychosocial supports
- ▣ Referrals for primary health care, substance abuse treatment, job training, educational services, and relevant housing services
- ▣ Family education and support



IDENTIFIED SYSTEM BARRIERS

- ▣ Acceptance of CCSI staff as credible third party witness
- ▣ Lack of safe and adequate housing
- ▣ Efforts to obtain guardianship
- ▣ Culture of living environment
- ▣ Communication with private physicians
- ▣ Access to medical and dental services



IDENTIFIED SYSTEM BARRIERS

- ▣ Cooperation of law enforcement outside Houston city limits
- ▣ Client history of non-compliance
- ▣ Lack of family support/secondary gain for families
- ▣ Access to early intervention
- ▣ Lack of legal motivation



ASSESSMENT

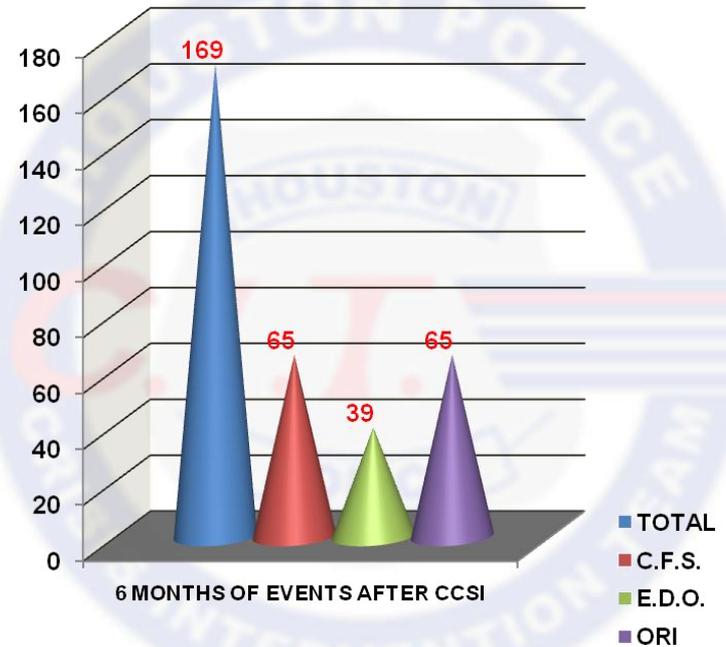
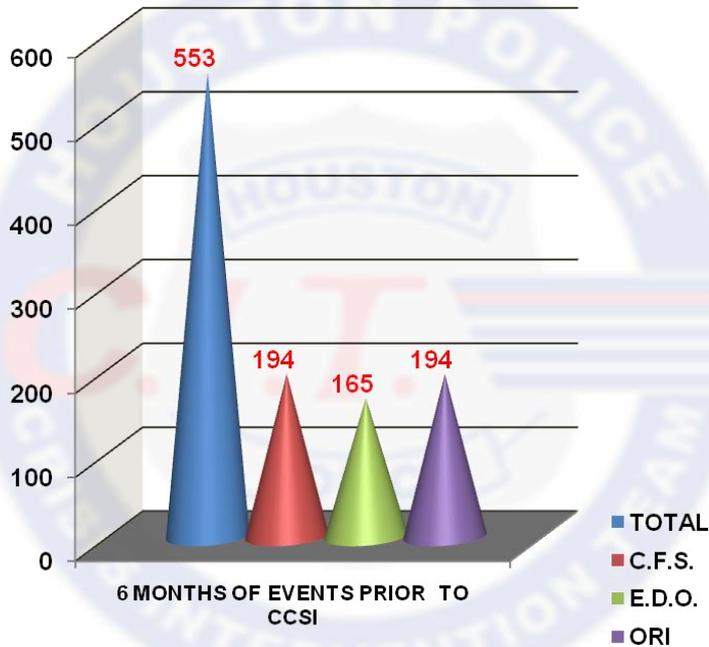


PILOT SUCCESSES

- ▣ Decreased the overall number of interactions between CCSI clients and the Houston Police Department by 70%
- ▣ Decreased admissions to NeuroPsychiatric Center by 21%
- ▣ Admissions to Harris County Psychiatric Center (HCPC) decreased by 51%



CCSI RESULTS

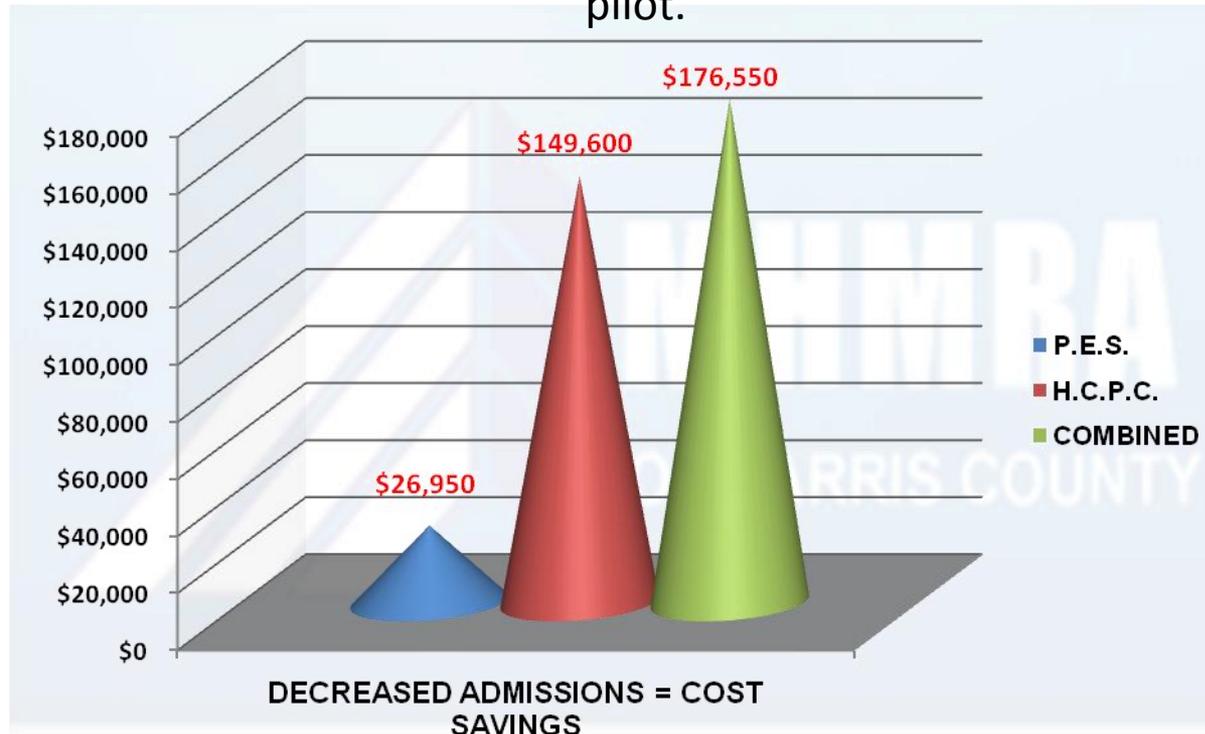


After the six-month pilot of intense engagement and interaction between the two case managers and the listed consumers, there was a 70% DECREASE in overall events reported by the police department. This represents a significant reduction of police contacts. Calls-for-service decreased by 67.3%, emergency detention orders (EDO) decreased by 76.4%, and offense reports also decreased by 67.3%.



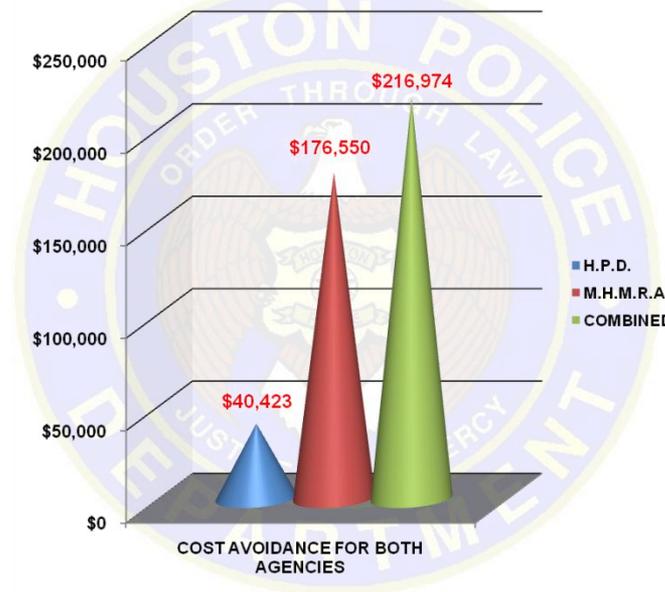
FINANCIAL IMPACT RESULTING FROM REDUCED HOSPITALIZATIONS

Clients enrolled in the CCSI program achieved an overall decrease in admissions to the NeuroPsychiatric Center and at the Harris County Psychiatric Center (HCPC). This decrease in admissions resulted in a cost savings of \$176,550 during the six-month pilot.



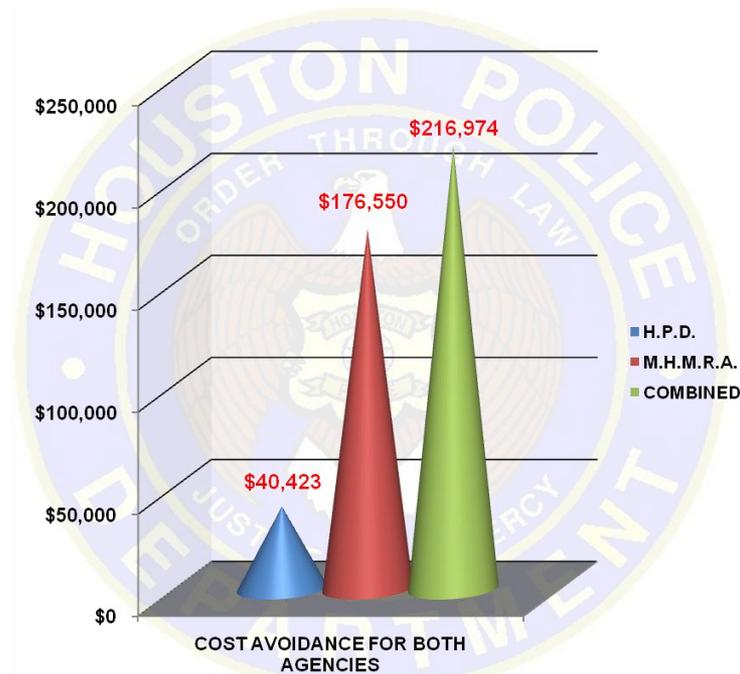
Cost Avoidance Resulting from Reduced Police Manpower Hours and Reduced Hospitalizations

During the six-month CCSI pilot, HPD realized a savings of 962 manpower hours. Calculated at \$42.02 hour, this manpower savings equates to \$40,423.24. In addition, there was a 51% decrease in HCPC hospital admissions and a 21% reduction in PES hospital admissions. This reduction in hospitalizations equates to a savings of \$176,550. The combined total costs diverted as a result of the CCSI six-month program was \$216,973.24.



Cost Avoidance Resulting from Reduced Police Manpower Hours and Reduced Hospitalizations

At a one-year program cost of \$139,000, and costs diverted over a projected 12-month period of \$433,946, the annual net cost avoidance is \$294,946.



WHAT WORKED???

- ▣ Diverted calls from 9-1-1 by providing case manager cell phone numbers to clients
- ▣ Strong advocacy role of case managers
- ▣ No State funding restrictions
- ▣ Houston Police Department involvement and support
- ▣ Support from the District Attorney's Office
- ▣ Consistency and dependability of case managers
- ▣ Networking (communication among providers)



CURRENT STATUS AND NEXT STEPS

- ▣ City Council extended funding through 2011
- ▣ Formation of an Advisory Council comprised of representatives (who have decision making authority) from community agencies
- ▣ Expand the program by adding additional clinical staff and pair into teams to work with clients
- ▣ Dedicate a full-time police officer position to the CCSI program



CHRONIC CONSUMER STABILIZATION INITIATIVE

Recipient of 2010 IACP
Community Policing Award



QUESTIONS ??



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