

# Behavioral Health is Essential To Health



Prevention Works



Treatment is Effective



People Recover



# Opening Doors to Recovery (ODR) PROJECT

“ENDING “STIGNORANCE”



**Bill Carruthers & Nora Lott Haynes**





## **2008 IACP Civil Rights Award Crisis Intervention Teams (CIT)**

**Georgia Bureau of Investigation (GBI) and NAMI GA**



**CIT Advisory Board**



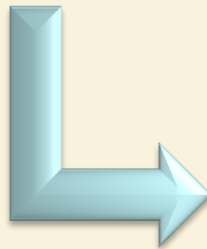
**Sam's Charge:**  
*CIT IS MORE than Just Training*



**Opening Doors**



**Partners**



- Georgia Bureau of Investigation
- Georgia Chiefs of Police Association
- Bristol-Myers Squibb Foundation
- Georgia Department of Corrections
- Savannah-Chatham Sheriffs Office
- Community Service Boards Association
- NAMI Savannah
- George Washington University
- Department of Behavioral Health & Developmental Disabilities
- Sheriffs Association
- CSX Transportation
- Georgia State Department of Labor
- Savannah-Chatham Metropolitan Police
- Savannah-Chatham County Jails
- NAMI Georgia
- Carter Center Mental Health Program
- Governor Nathan Deal



# **A Statewide CIT Program Morphs into a Community Mental Health Collaborative -Demonstration Research Project-**

# Behavioral Health Region 5 Summits for Adult Mental Health 2/09 through 9/09

## Battle #1

Problems Surrounding Management of Information Systems

## Battle #2

Study Best Practice Services

## Battle #3

Increase the Capacity of Housing for Seriously Mentally Ill

## Battle #4

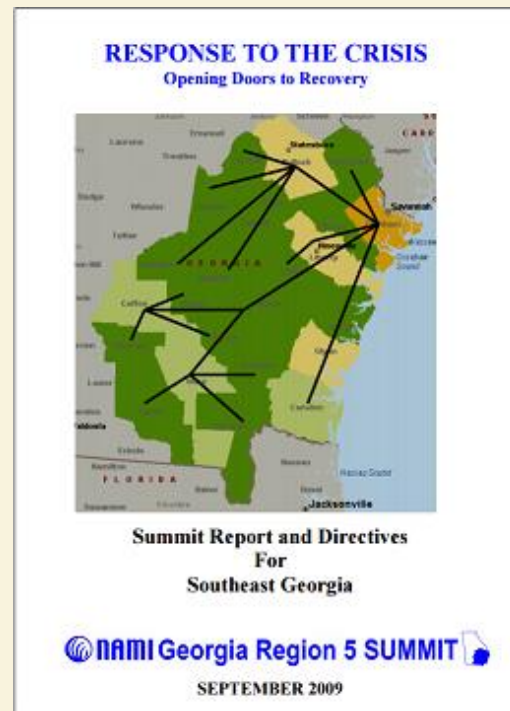
Develop Family/Peer/Self Case Management or Case Coordination Tool

The WAR: Reduce recidivism by 20%



# A COMMUNITY IN RECOVERY

## BRINGING STAKEHOLDERS TOGETHER RESPONSE TO THE CRISIS REPORT 2009





**ODR PHASE I (2010-2013)  
REDUCING  
HOSPITALIZATION  
RECYCLING  
-DEMONSTRATION PROJECT**





# Community Work Groups

## Meaningful Day

Chair Yovancha Lewis-Samuels, DOL

## Adequate Treatment

Chair Dr. Charles Li  
GA Regional Hospital,  
Savannah

## Safe Housing

Mark Baggett

## Curriculum

Dr. Glyn Thomas and June DiPolito, CSB

## Technology

Mimi McGahee VSU ETC

## Gaps and Directives

Dr. Frank Bonati, CSB

# Video

- <https://www.youtube.com/watch?v=Y2NJEL2WfCU>

# Circles of Support

Help ODR participants attain & sustain recovery by:

- providing aggressive case management (adequate treatment, safe housing, meaningful day, technology)
- identifying traditional and non-traditional community services and support / “Resource Mapping”
- tailoring personalized care / “Passport to Recovery”
- Identifying gaps barriers and plugging them up
- developing community supports
- implementing NAMI programs for participants, family, and community

# Recovery Team

## Community Navigation Specialists (CNS) Team

- Peer Navigation Specialist (PCNS)
  - mental health consumer in recovery
- Family Navigation Specialist (FCNS)
  - family member of person with mental illness
- Professional Navigation Specialist (PfCNS)
  - licensed mental health professional

# ~Pillar of Recovery~

## Safe, Appropriate Housing

Homelessness

Transition from Institution

Supervised and Partially Supervised Group Homes

Permanent Supported Housing

Rental Housing and State Housing Vouchers

Home Ownership



## ***Achieving The Promise:*** **Mental Health Commission Report**

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“The lack of decent, safe, affordable and integrated housing is one of the most significant barriers to full participation in community life for people with severe mental illness”

The President's New Freedom Commission on Mental Health, p. 31

“Many mental health systems....do not see housing as their responsibility”

The President's New Freedom Commission on Mental Health  
Subcommittee on Housing and Homelessness, p. 7

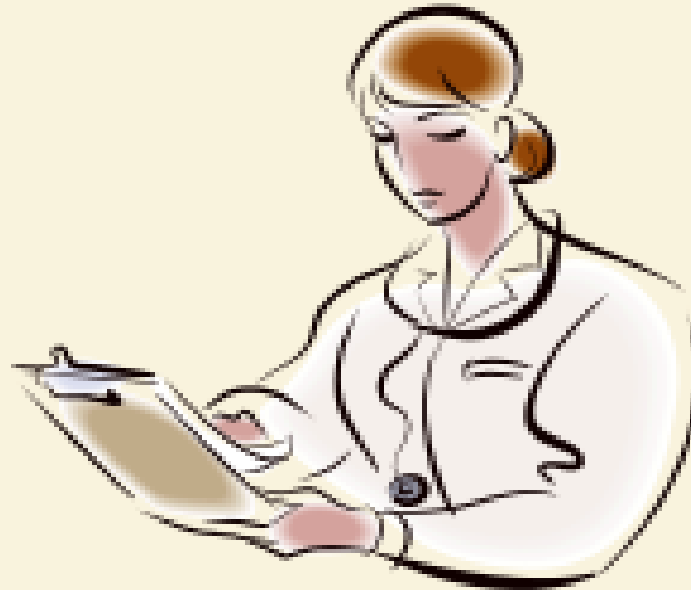
# ~Pillar of Recovery~

## Meaningful Day



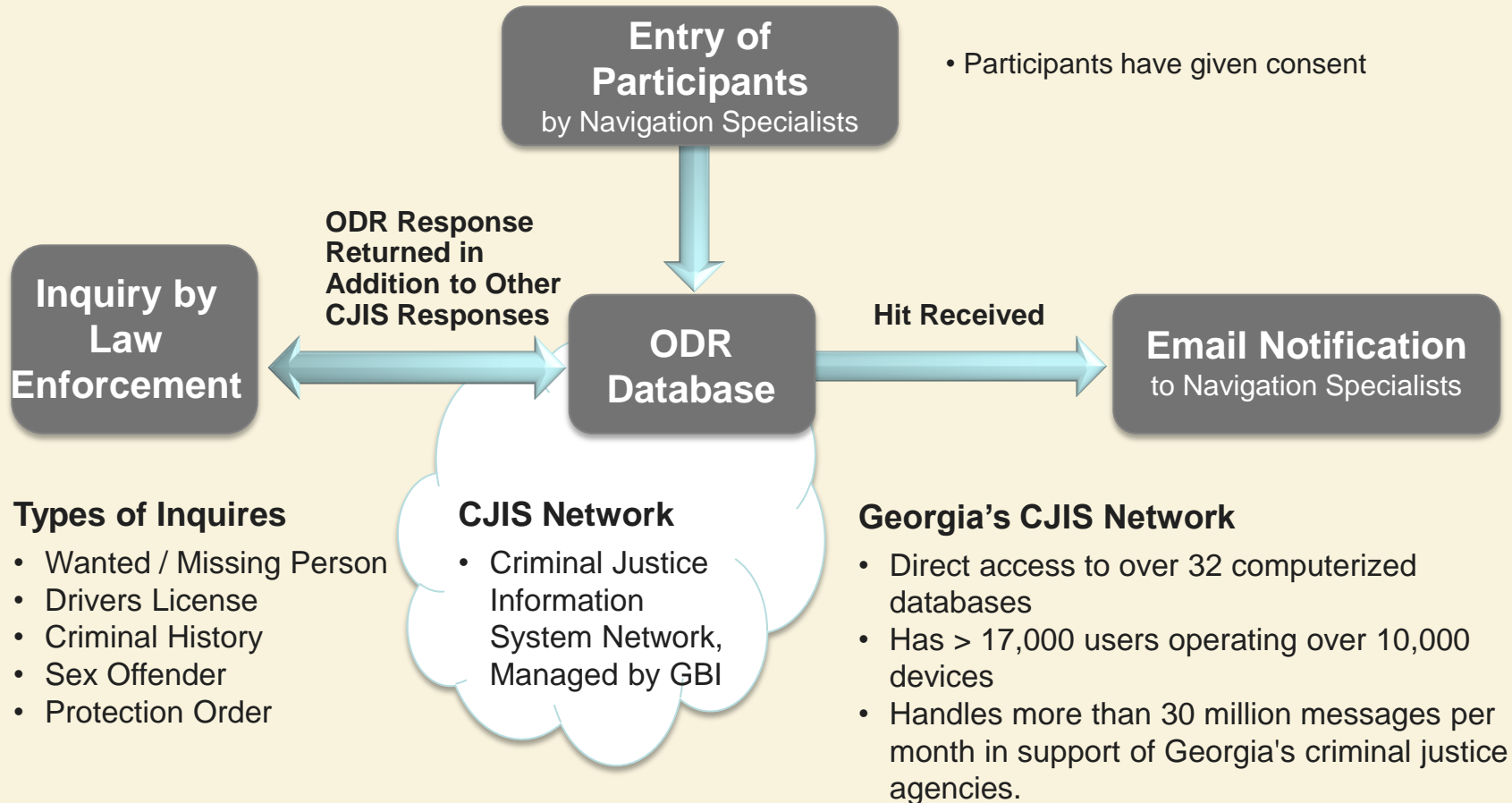
# ~Pillar of Recovery~

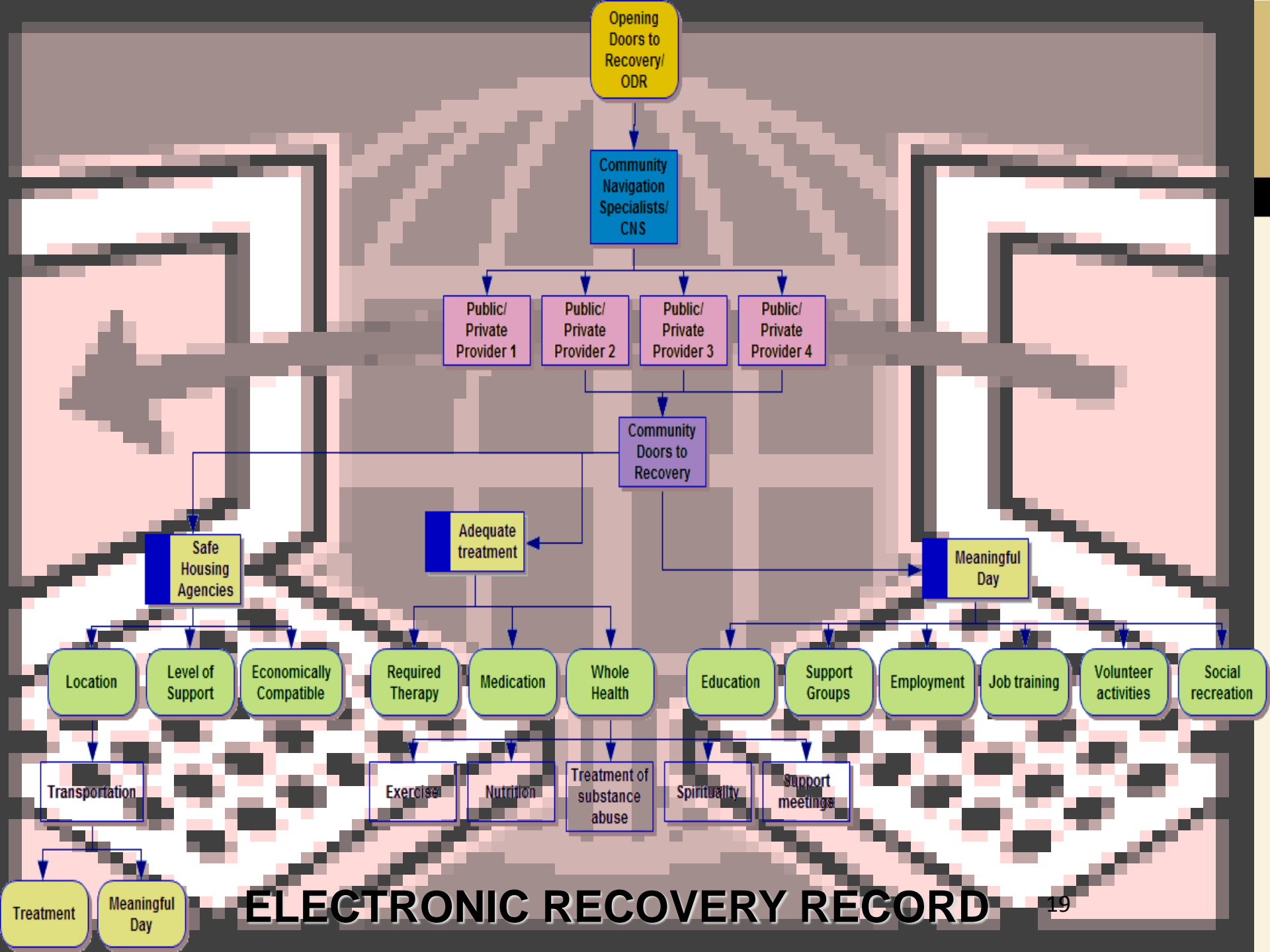
## Adequate Treatment



# ~Pillar of Recovery~

## Technology – GCIC ODR Flow Chart





# ELECTRONIC RECOVERY RECORD

# THE DEEP END

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**HOSPITALIZATION. INCARCERATION. HOMELESSNESS.**

CONSENT FORMS  
WAIVE HIPAA ROADBLOCKS  
MOUs with PARTNERS  
STAKEHOLDER MEETINGS & LEADERSHIP TEAM



# Video

- [www.youtube.com/watch?v=cMoSaDWyXfo](http://www.youtube.com/watch?v=cMoSaDWyXfo)



# PHASE ONE RESEARCH RESULTS

# ODR Research

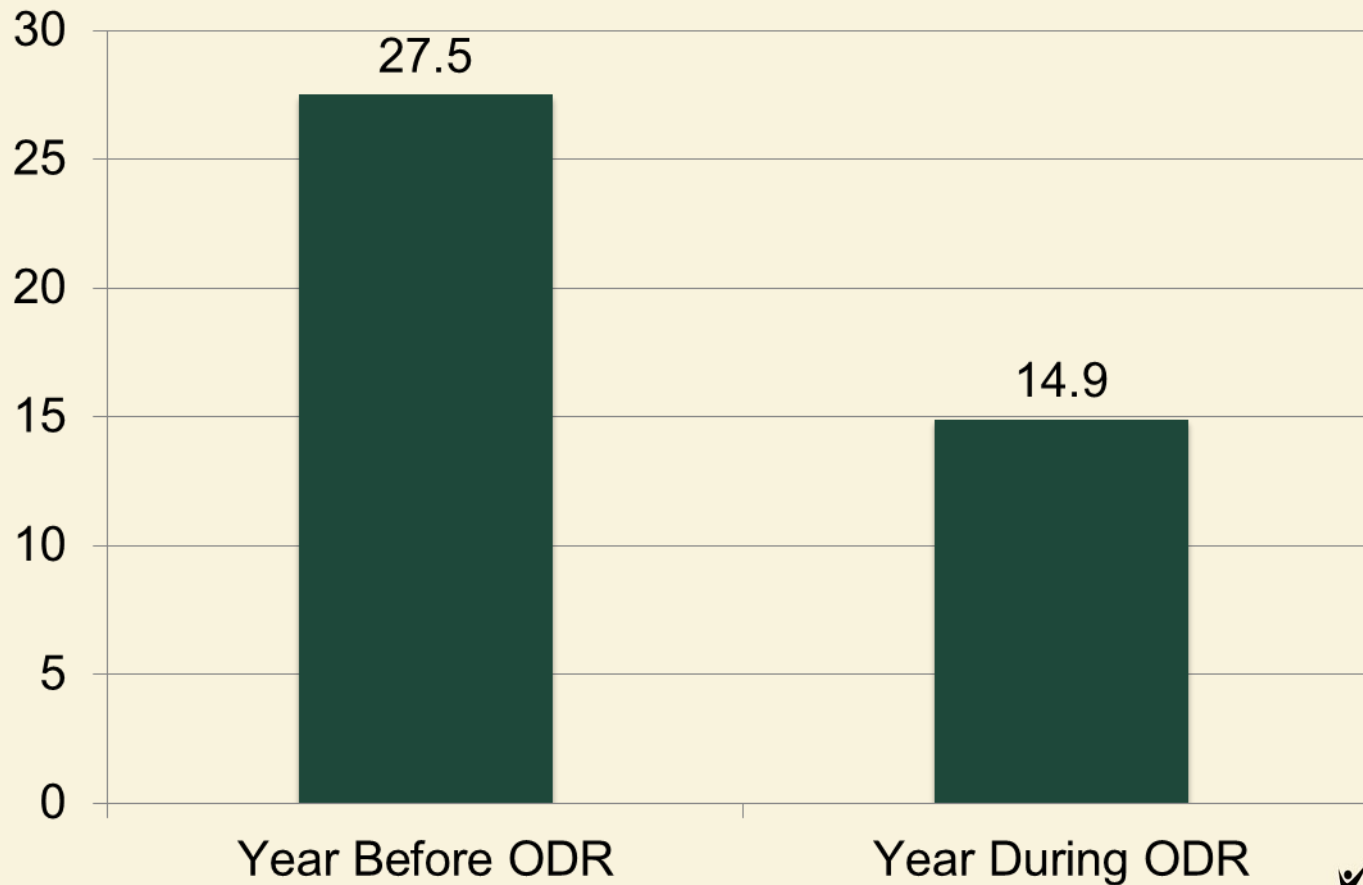
- **Aim A (CNS curriculum evaluation)**
- **Aim B (qualitative program evaluation)**
- **“Meaningful Day” study complete and research manuscript submitted**
- **Family CNS study complete and article is “in press”**

# ODR Research: Aim C Analyses

- Enrolled 100 at discharge from GRHS or three Region 5 CSUs
- For the main Aim C outcome, we will focus on 72 who received at least 6 months of ODR services (i.e., excluding those continuously incarcerated, relocated out of state, etc)
- Primary outcome: days hospitalized (DBHDD)
- Secondary outcome: number of arrests (GCIC)

# Number of Days Hospitalized in Georgia State Hospitals

(DBHDD Data) n=72



# ODR Phase I Study Results

## Study Participants

- **Significant improvements found in:**
  - *Insight*
  - *Satisfaction with Mental Health Services*
  - *Quality of Life*
  - *Community Adjustment*
  - *Community Navigation Competencies*



# Study Results – Navigation (CNS) Competencies

## Community Navigation Competencies

- *Getting medicine*
- *Keeping safe, stable housing*
- *Getting reliable transportation*
- *Using a computer*
- *Managing money*
- *Shopping for groceries*
- *Eating a healthy diet*
- *Using a cell phone*
- *Being involved in the community*

# Evidence

- **Research evidence is essential to fully support programs like CIT and ODR**
  - *Does CIT result in a lower arrest rate?*
  - *Does ODR prevent arrest/incarceration?*
  - *Does ODR promote recovery?*

# Does ODR prevent arrests?

- **Preliminary, anecdotal evidence:**
  - *July 4th, a Savannah police officer called 1-800 Pineland access number because subject's name came up in GCIC system, noting ODR participant.*
  - *Pineland immediately contacted participant's CNS, who met participant and officer in the field.*
  - *Protocol likely prevented the ODR participant from going back to jail.*

# Study Results – Community Adjustment

- **Community Adjustment**
  - *Physical health*
  - *Money management*
  - *Getting together with other people*
  - *Alcohol and/or drug abuse*
  - *Adherence with treatment*
  - *Hope for future*

# Many things that we can't "measure"

- **ODR's diverse partnerships**
- **ODR's community involvement that changes the hearts and minds of the community**
- **How law enforcement, emergency rooms, and many others rallied to support our 100 participants**
- **Transformation of attitudes, agencies, peer movement, ending "stignorance."**

# Funders ODR Phase I

- **Opening Doors To Recovery Region 5 Project- A Community Collaborative**
- **Bristol-Myers Squibb Foundation**
- **Georgia Department of Behavioral Health & Developmental Disabilities**
- **CSX**





**Our Demonstration Project  
Has Succeeded.**

**Now It's Time for the Next  
Step of ODR.**

# NIMH ODR Grant

- **5-year randomized, controlled trial via federal research grant: Dr. Compton and Gateway Community Service Board**
- **1 Gateway CNS team, case load of 40**
- **5 years, 240 randomized to ODR (120) and (120) to Case Management**
- **Evidence based practice (?)**

**GEORGIA DEPARTMENT OF  
CORRECTIONS(GDC) /COMMUNITY  
SERVICE BOARDS (CSB)  
PHASE 2 (2014-2017)  
REDUCING INCARCERATION  
RECYCLING  
-DEMONSTRATION PROJECT-**

# Opening Doors to Recovery (ODR) Project to Reduce Recycling of Incarcerated Mentally Ill In the Department of Corrections—PHASE 2

- **State of Georgia**
- **State of Georgia Department of Corrections**
- **NAMI Georgia**

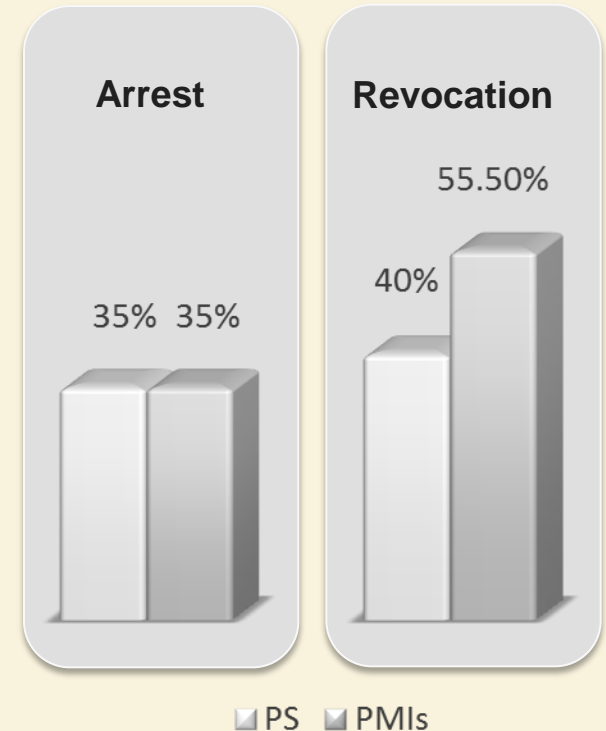
# Perceived Root of Problem

- **People on the front lines believe:**
  1. “Too many people with mental illness become involved in criminal justice system because of failed mental health system.”
  2. “If many of the people with mental illness received the services they needed, they would not end up arrested, in jail, or facing charges.”



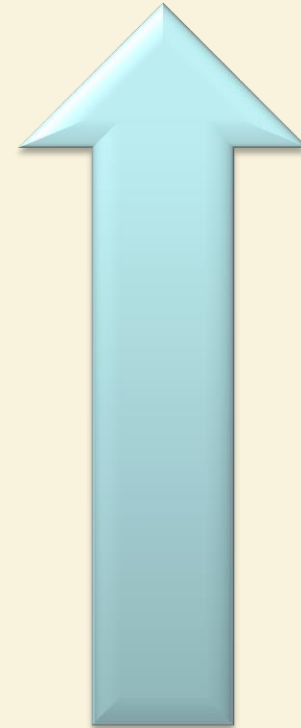
# Arrest vs. Revocation

- Those with serious mental illness often “fail” supervision
- Vidal, Manchak, et al. (2009)
  - Screened 2,934 probationers for mental illness; 13% screened in
  - Followed for average of two years
- No more likely to be arrested but
- 1.38 times more likely to be revoked



# Question

- **Why has incarceration and revocation rates of mental health consumers risen much faster than rates of non-mental health consumers?**
- **Is the culprit:**
  1. *Deinstitutionalization?*
  2. *Economic crisis?*
  3. *Tough on crime legislation?*



# ODR Corrections

## ODR caseloads typically include:

- Offenders released from an Integrated (co-occurring) Treatment Facility (ITF)
- Offenders released from prison assessed with a mental illness
- Offenders who have a serious mental illness (i.e., schizophrenia, bipolar, major depression, severe post-traumatic stress disorder, etc.) or are currently, or have a history of, receiving MH treatment and/or prescribed MH medications
- Offenders incarcerated in a jail or coming directly from prison or sentenced as a straight probation sentence.



# How to Identify Participants for Mental Health Probation Officer Specialist (MHPOS) and ODR

- **Adjudicated from court**
- **Those on regular probation case load who are receiving psychiatric services**
- **Closer look at a repeat offenders**

# What is ODR in Corrections?

- 2 Probation Officers (a Professional, a Family Member) and a CPS CSB Peer in Recovery serving 33 repeat offenders with mental illness (3 Community Navigation Specialists).
- The most intense supports available for mentally ill offenders.
- CNS navigate and collaborate with all supports and agencies seeking to reduce gaps and barriers.

# ODR-GA Department of Corrections/CSB

- **ODR is a demonstration research project designed to determine if the project reduces recidivism and promotes recovery for court involved persons:**
  - **ODR focuses on 4 pillars of recovery: safe housing, adequate treatment, meaningful day, & technology through the participant's focus of their Passport to Recovery™.**
  - **CNSs resource map their community, identify gaps and barriers, engage all community Circles of Support™ through collaboration, have three specific areas of concentration through detailed job duties/responsibilities for the Peer, the Family, and the Professional Community Navigation Specialists.**
  - **How can ODR work in harmony with the current MHPOS program and enhance recovery for mentally ill engaged with the judicial system?**
  - **How best to assure fidelity so the research is measuring apples to apples-- ODR Phase 1 and Phase 2 (is ODR effective for those recycling in and out of hospitalization and incarceration)?**

# Recovery is Possible



# Behavioral Health is Essential To Health



Prevention Works



Treatment is Effective



People Recover