

# Kendall County Roadmap

Community stakeholders can consider the following next steps to reduce justice involvement for people with mental illness (MI), substance use disorders (SUD), or intellectual and developmental disabilities (IDD). For more information and resources, review the Kendall County SIM Report.

## Invest in Strategic Priorities

1. Expand access to community-based mental health services.
2. Expand jail-based mental health services.
3. Expand specialized law enforcement mental health crisis response.
4. Expand early intervention, prevention, and community education programs.

## Support Local Planning, Partnership and Education

### 1. Coordinate

- Strengthen behavioral health and justice partnerships through regular convening of a leadership team.
- Establish subcommittees dedicated to implementing the action plans developed during the SIM Workshop.

### 2. Partner

- Identify opportunities to strengthen relationships with new stakeholders (e.g., housing partners, IDD services, jail mental health providers).
- Learn from other similar-sized counties implementing best practice models.

### 3. Train

- Train stakeholder groups on identifying, responding and effectively treating people with MI, SUD, and IDD.

## Build Upon Existing Efforts

**Collect data and convene a workgroup of established behavioral health and justice stakeholders to develop a plan to augment services and enhance collaboration.**

**Leverage existing relationships between MHDD and the Sheriff's Office to explore ways to fund a jail mental health position.**

**Use newly-collected data to apply for grants to expand mental health co-response or specialized law enforcement response.**

**Conduct a needs and capacities assessment to align services to meet the community's needs.**

# Kendall County Gaps, Opportunities, and Best Practices

## Intercepts 0 & 1

Community Services, Crisis Services, and Law Enforcement

### Selected Gaps:

- Mental health calls are not identified at dispatch.
- MCOT is unable to respond to all mental health calls in time frames desired by stakeholders, shifting the burden to law enforcement.
- Limited mental health and substance use disorder treatment options.
- Long wait times for law enforcement when dropping off individuals at the hospital.

### Opportunities:

- Enhance 911 call screening through the use of trained call takers.
- Explore opportunities to build shared trainings for law enforcement.
- Learn from Blanco's Community Paramedic program.
- Continue exploring options to expand access to hospital beds, such as the potential STRAC partnership.

## Intercepts 2 & 3

Initial Detention, Jails, and Courts

### Selected Gaps:

- Pre-trial service options are limited to drug-related charges.
- No psychotherapy in the jail.
- No court-ordered medication process in jail.
- Lack of holistic services for justice-impacted families.
- Few forensic psychologists for competency evaluations.

### Opportunities:

- The creation of a jail navigator position to assist with diversion, continuity of care, and forensic tasks.
- Local nonprofit partners have expressed interest in enhancing jail services.
- Creation of a treatment court with the addition of another district court.
- Jail in-reach strategies like court-ordered medications can be implemented to improve care and reduce forensic wait times.

## Intercepts 4 & 5

Reentry and Community Corrections

### Selected Gaps:

- No reentry case manager or reentry planning assistance.
- No intensive outpatient services for mental health or substance use in Kendall Co.
- High cost of living and little affordable housing.
- Limited public transportation.
- No continuity of care planning for individuals released from jail without bond, such as those whose charges were dismissed.

### Opportunities:

- Explore opportunities to participate in wider initiatives to secure additional funding.
- Document workflows and identify opportunities for data sharing with reentry partners.
- Consider ways reentry planning may begin during jail intake and consider collecting information related to housing status and income.

## Best Practices at Each Intercept

### Intercepts 0 & 1

MH training for LE and 911 dispatch

Police coding of MH calls

Police referrals to treatment

MH and SUD diversion centers

### Intercept 2 & 3

Consistent screening for MI, SUD and IDD

Active forensic waitlist monitoring

Pretrial supervision and diversion programs

Jail-based SUD and MH services

### Intercept 4 & 5

Reentry planning (psych. medications, benefits coordination, peer support)

Specialized MI, IDD and SUD caseloads

Jail in-reach transition planning