

Midland County Roadmap

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

Invest in Strategic Priorities Support Local Planning, Partnership and Education Build Upon Existing Efforts

1. **Expand crisis options through the development of a diversion center.**
2. **Develop a county-wide data strategy.**
3. **Enhance continuity of care for justice-involved youth.**
4. **Improve education, training & services for people with MI & IDD.**
5. **Expand the existing jail diversion task force into a broader mental health task force to improve diversion and crisis response.**

1. Coordinate
 - Strengthen behavioral health and justice partnerships through expansion of the existing Midland County Jail Diversion Task Force into a broader Mental Health Task Force.
 - Establish a taskforce to support data-driven action plan implementation.
2. Partner
 - Identify opportunities to strengthen relationships with new stakeholders (e.g. housing partners).
 - 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.

- Expand Jail-Based Competency Restoration services**
- Strengthen mental health treatment options for the Midland County Juvenile Probation Department**
- Streamline sharing of 16.22 forms across court and judicial stakeholders**
- Expand the use of peer support services across the SIM**
- Expand pre-trial diversion programs**

See the Strategic Action Plans on pg. 20 of the Midland SIM Report for additional details.

Midland County Gaps, Opportunities and Best Practices

Intercepts 0&1

Community Services, Crisis Services & Law Enforcement

Selected Gaps:

- Information sharing across stakeholder groups
- Mental health (MH) training for 911 dispatch and law enforcement (LE)
- Limited alternatives for diversion from emergency rooms and jail
- Crisis services for youth

Opportunities:

- Collect data on MH calls for service and identify opportunities to flag frequent callers and locations
- Advance existing diversion center planning efforts
- Provide additional training on MH and IDD to 911/ dispatch and law enforcement

Intercepts 2&3

Initial Detention, Jails, & Courts

Selected Gaps:

- Use of risk assessments to set bond conditions
- Substance use disorder (SUD) services in jail
- Long wait times for inpatient competency restoration services
- Pre-trial diversion programs
- Protocols for information sharing
- Psychiatric services for juveniles in detention facilities

Opportunities:

- Use a validated risk assessment to determine bond and pre-trial supervision
- Identify opportunities to offer SUD treatment in jail
- Educate court on available behavioral health services

Intercepts 4&5

Reentry & Community Corrections

Selected Gaps:

- Medicaid benefits terminated rather than suspended in jail
- Limited affordable housing for people with criminal records
- Limited in-person community based behavioral health services

Opportunities:

- Pilot program to suspend rather than terminate Medicaid benefits
- Utilize peers to support community reentry programs
- Provide additional MH training to probation and parole officers

Best Practices at Each Intercept

Intercept 0 & 1

MH Training for LE and 911 Dispatch

MH Diversion Centers

Police Coding of MH Calls

LE and MH Co-Responder Models

Intercept 2 & 3

Consistent Screening for MI, SUD and IDD

Pre-trial Supervision and Diversion Programs

Active Forensic Waitlist Monitoring

Intercept 4 & 5

Robust reentry planning (psych medications, benefits coordination, peer-support)

Specialized MI, IDD and SUD Caseloads