Stakeholder Engagement and the Importance of Collaboration for Program Development and Success
Overview

Introduction

City of Madison Police Department

Portland Police Department

Questions & Answers
National **nonprofit, nonpartisan** membership association of state government officials

Represents **all three** branches of state government

Provides **practical** advice informed by the best available evidence
A PMHC program is:

- A law enforcement-based program, which involves collaborating with a mental/behavioral health entity.
- Designed to divert individuals with mental illness or in mental health crisis from unnecessary jail bookings and/or hospitalization.

BJA PMHC Toolkit: [https://pmhctoolkit.bja.gov](https://pmhctoolkit.bja.gov)
Law Enforcement-Mental Health Learning Sites

Current Sites

- Represent a diverse cross-section of perspectives and program examples
- Dedicated to helping other jurisdictions improve their responses to people with mental illnesses.
- Host site visits from interested colleagues and other local and state government officials, and answer questions from the field.
- Work closely with CSG Justice Center staff to develop materials for practitioners and their community partners.
Questions for Consideration

1. Who are your current collaborating partners?

2. Do you have all key stakeholders represented at the table?

3. Are there other key stakeholders you should consider including to improve program efficacy and sustainability?

4. How do you approach, engage and include other key stakeholders in your program?

5. How will effective stakeholder engagement aid in sustainability of the program?
Collaboration: The Big Picture

Who should be involved?

Who do you have at the table?

• **Justice players:** law enforcement, sheriff, jail, prosecutor, defense, judges, pretrial, probation, court administration, IT and a research partner

• **Community-based services:** mental health, substance abuse treatment, housing, veteran’s services, and other assistance
Building Collaboration Across Intercepts

Sequential Intercept Model

Intercept 1
Law enforcement

Intercept 2
Initial detention/Initial court hearings

Intercept 3
Jails/Courts

Intercept 4
Reentry

Intercept 5
Community corrections

COMMUNITY

Local Law Enforcement

Initial Detention

First Appearance Court

Specialty Court

Dispositional Court

Prison/Reentry

Jail/Reentry

Parole

Probation

COMMUNITY

911

Arrest

Violation

Violation
Creating the Collaborative Culture

More than a signed letter of support and a quarterly meeting!
Building Collaboration: Case Studies

Madison, Wisconsin

Portland, Maine
Engaging the Community and Getting Buy-In

Sgt. Eugene Woehrle
City of Madison Police Department
Department Philosophy

• The 3 C’s
  – Compassion
  – Communication
  – Collaboration

• Each MPD officer is trained to respond to persons with mental illness with compassion, to utilize appropriate communication/de-escalation and stabilization skills, and to work collaboratively toward an effective resolution.
History

• Recruiting • Hiring • Training

• 1980’s – One full-time commissioned position to serve as a liaison to mental health service providers

2004
• Department begins to decentralize
• Mental Health Liaisons (part-time volunteers)

2015
• Community Outreach Section added to Organizational Chart
• Full-Time Mental Health Officers added

2016
• In-House Crisis Workers added

• Data Analysis and Research Based Evaluations
Agency Collaborations

• Partner agencies (not limited to):

  • Journey Mental Health Center
  • Dane County Human Services
  • NAMI-Dane County
  • NAMI-Wisconsin
  • Dane County Adult Protective Services
  • Forward Solutions
  • Disability Resources
  • Joining Forces for Families

  • Public Health
  • Dane County Corporation Counsel
  • Recovery Coalition of Dane County
  • Meriter Hospital, Meriter Child and Adolescent Psychiatry, UW Hospital, St. Mary’s Hospital
  • Waisman Community TIES
  • Tellurian
  • Probation and Parole
  • UW-Madison
Unique Connections

• Local Jurisdictions and Geography:
  – Numerous Law Enforcement agencies
  – Numerous Service Provider agencies
  – Three Hospitals, County Detox facility, County Jail

• Examples:
  – Training consortium
  – Town Hall style meetings/presentations
  – Having a “seat at the table”
Other Collaborations

• Mental Health Team has representatives on:
  – Board of Directors for Journey Mental Health Center
  – Board of Directors for NAMI Dane County
  – NAMI Dane County’s Advocacy Committee
  – Recovery Coalition of Dane County member

• Combined, our team is well-connected within the mental health services arena, as we regularly attend a variety of relevant committee/community meetings, and have established collaborative relationships within this system that assist us on a daily basis to provide effective and appropriate services to people in our community with mental illness.
Benefits of Having Robust Partnerships

• Consistent Approach
  – Point-of-Contact
• Openness & Understanding
  – One-way conversations sometimes need to happen
  – Various Policies & Procedures
• Trust each other’s assessments - Examples
• Team work and problem solving
• Referrals
  – Law Enforcement to Mental Health
  – Mental Health to Law Enforcement
• Testimonials
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3 Full time clinicians and up to three interns are available to officers in responding to calls for service, follow up, and liaison work.

- **Police Liaison**
- **Behavioral Health Coordinator**
- **Substance Use Disorder Liaison**
**Stakeholder Engagement**

- BHU is actively engaging, maintaining and expanding our relationships with the community for the most *effective* and *efficient* law enforcement and behavioral health collaboration possible.

- We actively are involved on individual cases and system management with:

<table>
<thead>
<tr>
<th>Hospitals</th>
<th>Shelters</th>
<th>District Attorney Office</th>
<th>Jail</th>
<th>Probation</th>
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<tr>
<td>Pretrial</td>
<td>NAMI</td>
<td>Schools</td>
<td>Mental Health Agencies</td>
<td>Substance Use Agencies</td>
</tr>
</tbody>
</table>
Barriers

– The individual wants treatment, but there are **no appropriate support options and limited treatment options**, either due to lack of openings or funding.

– The **individual is resistant** to supports, treatment, or alternative diversion from incarceration, despite efforts by law enforcement and behavioral health partnerships.
Barriers

• Strict involuntary commitment laws
  – Limit opportunities to address the safety of individuals in crisis, those around them, responding officers, and the community at large.

• Lack of integrated trauma, mental health, and substance use long term treatment
  – A **statewide meeting** was held in March to address these issue.
  – **Next step: Proposing legislative action**
Looking Forward

• We are always seeking opportunities to learn more effective and efficient ways to collaborate responses to individuals with behavioral health needs within our community and state.

• We appreciate collaborating with, and learning from others so please do not hesitate to reach out.
Questions and Answers
Contact Information

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Thank You

Join our distribution list to receive CSG Justice Center project updates!

csgjusticecenter.org/subscribe

For more information, contact NAME (nsmith-kea@csg.org)