# Data Explainer Series

*Week 3: Justice Involvement*

August 12, 2025

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**CalMHSA**
California Mental Health Services Authority

# Series Schedule

| Webinar Date | Office Hours Date | Webinar Title |
|---|---|---|
| 7/29/2025 | 8/1/2025 | Introduction to Statewide Goals & Access to Care |
| 8/5/2025 | 8/8/2025 | Homelessness |
| **8/12/2025** | **8/15/2025** | **Justice-Involvement** ← *You Are Here* |
| 8/19/2025 | 8/22/2025 | Removal of Children from the Home |
| 8/26/2025 | 8/29/2025 | Overdoses and Suicides |
| 9/2/2025 | 9/5/2025 | Untreated Behavioral Health Conditions, Prevention and Treatment of Co-Occurring Physical Health Conditions |
| 9/9/2025 | 9/12/2025 | Care Experience, Quality of Life, Social Connection |
| 9/15/2025 | 9/19/2025 | Engagement in School and Work |
| 9/23/2025 | 9/26/2025 | Institutionalization |
| 9/30/2025 | 9/30/2025 | Collaborating with Local Planning Processes |

# BHT Data Explainer Series

**Impact:**

Empowers you to interpret data, understand expectations, and engage in data-informed planning to produce your first BHSA Integrated Plan



*Thank you to DHCS for sponsoring this series.*

# CalMHSA

**California Mental Health Services Authority (CalMHSA)** is a Joint Powers of Authority – an independent government entity – formed in 2009 by counties and cities throughout the state to focus on collaborative, multi-county projects that improve behavioral health care for all Californians.

By pooling resources, forging partnerships, and leveraging technical expertise on behalf of counties, CalMHSA develops strategies and programs with an eye toward transforming community behavioral health; creates cross-county innovations; and is dedicated to addressing equity to better meet the needs of our most vulnerable populations.

# Housekeeping

- Each week we have a new webinar topic and corresponding office hours
- The aim of office hours is to dive a bit deeper and respond to questions
- All webinars will be recorded and placed on our website *(office hours will not be recorded)*
- Switch your Zoom to Gallery View

# Agenda

Welcome

Recap: Statewide Goals and Measures

Priority Goal: Justice Involvement

What? (Goal/Measure)

Why? (What Does this Mean?)

Hunches (What Do I Do?)

# Statewide Behavioral Health Goals and Associated Measures

# Behavioral Health Transformation

**DHCS Vision:**

All Californians have access to behavioral health services leading to longer, healthier, and happier lives, as well as improved outcomes and reduction in disparities.
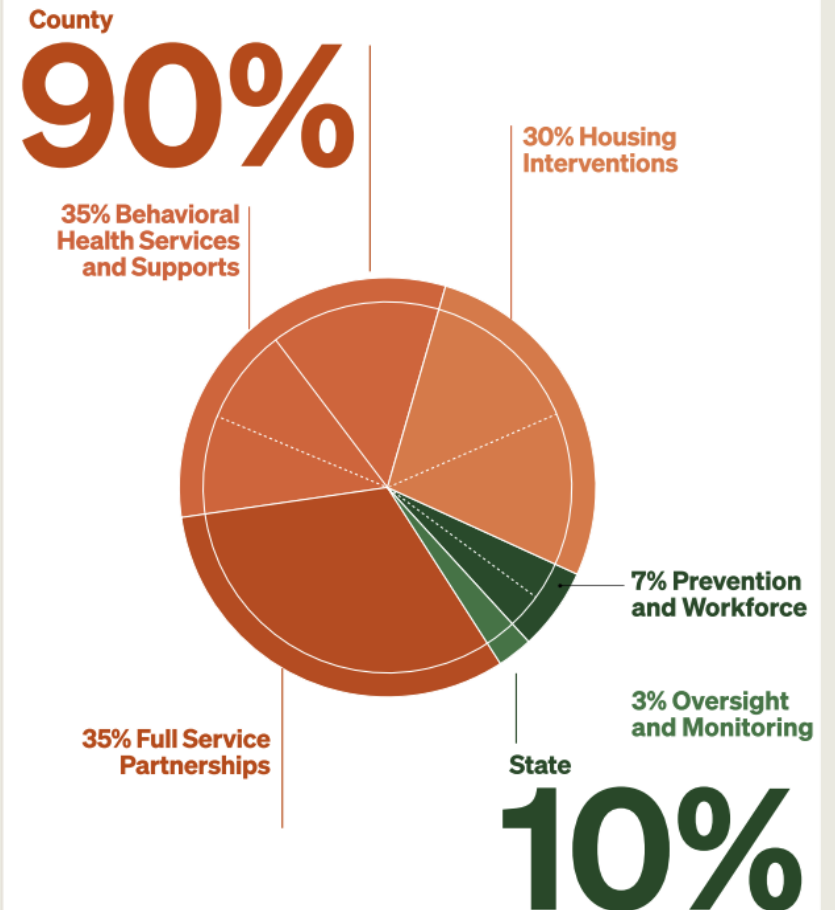
# Behavioral Health Services Act

## MHSA Modernization = BHSA

- Increased focus on most vulnerable populations

- Broadening of county behavioral health plan responsibilities to include housing interventions

- Expands eligibility to Substance Use Disorder only populations

- Redirecting administration of funding for population-based prevention and workforce programming

**Introduces Behavioral Health Services Act Integrated Plan**

**Introduces Statewide Behavioral Health Goals and Measures**



Funding Allocations

County
90%

35% Behavioral Health Services and Supports

30% Housing Interventions

7% Prevention and Workforce

3% Oversight and Monitoring

35% Full Service Partnerships

State
10%

# BHT Goal Phases

## PHASE 1 ⬅ *You Are Here*

Use *publicly available, population-level data* for community planning processes and resource allocation in the BHSA Integrated Plan.

*Identify interventions* to improve areas of low performance relative to statewide rate.

## PHASE 2

Use *individual client-level data* to measure performance and identify Plan accountability for BH goals.

In Progress – further guidance forthcoming.

# Phase 1 Goal & Measure Structure

- Goals - "Priority" and "Additional"
  - Six "Priority Goals" that BHPs must address.
  - BHPs select <u>one</u> "Additional Goal" (from <u>eight</u> options) based upon county performance and local needs.

- Measures - "Primary" and "Supplemental"
  - Each goal has one or more associated measures.
  - "Primary Measures" reflect the community's status relative to the goal.
  - "Supplemental Measures" provide additional context.

# BHT Population Health Strategy

Use county performance on the six priority goals and choose one additional goal to inform the Community Planning Process and complete the BHSA Integrated Plan.

Choose at least one

**Priority Goals**
1. Access to Care ⬆
2. Homelessness ⬇
3. Institutionalization ⬇
4. Justice-Involvement ⬇
5. Removal of Children from Home ⬇
6. Untreated Behavioral Health Conditions ⬇

**Additional Goals**
1. Care Experience ⬆
2. Engagement in School ⬆
3. Engagement in Work ⬆
4. Overdoses ⬇
5. Prevention/Treatment of Co-occurring PH Conditions ⬆
6. Quality of Life ⬆
7. Social Connection ⬆
8. Suicides ⬇

# Justice Involvement

*Priority Goal*

What?

# Reducing Justice Involvement

- This goal focuses on decreasing the number of adults and youth with behavioral health needs who become involved in the justice system.

- More than half of incarcerated individuals live with a behavioral health condition but often receive little or no treatment. After release, they face increased risks of overdose, suicide, and poor health outcomes.

- Building coordinated systems of care can prevent justice involvement and support better outcomes for those returning to the community.
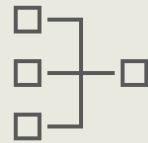
# Justice Involvement Measures

| Measure | Type of Measure |
| --- | --- |
| 1) Arrests: Adult and Juvenile  (Rate per 100,000) | Primary |
| 2) Adult Recidivism Conviction Rate (3-year) | Supplemental |
| 3) Incompetent to Stand Trial (IST) Counts (Rate per 100,000) | Supplemental |

Data is a clue, not a conclusion.

# Measuring Justice Involvement

**Intricacies of interpreting justice involvement data:**

System complexity

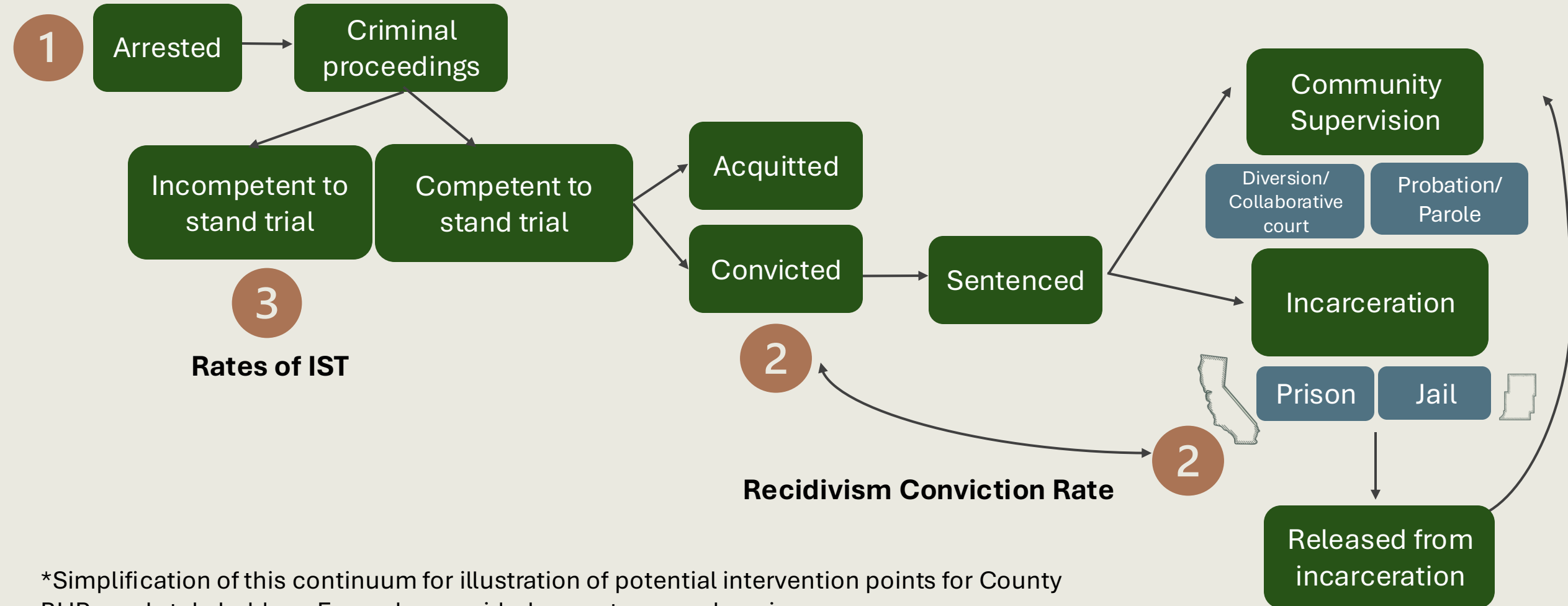Movement between counties
State/county custody transitions

Legacy of systemic discrimination
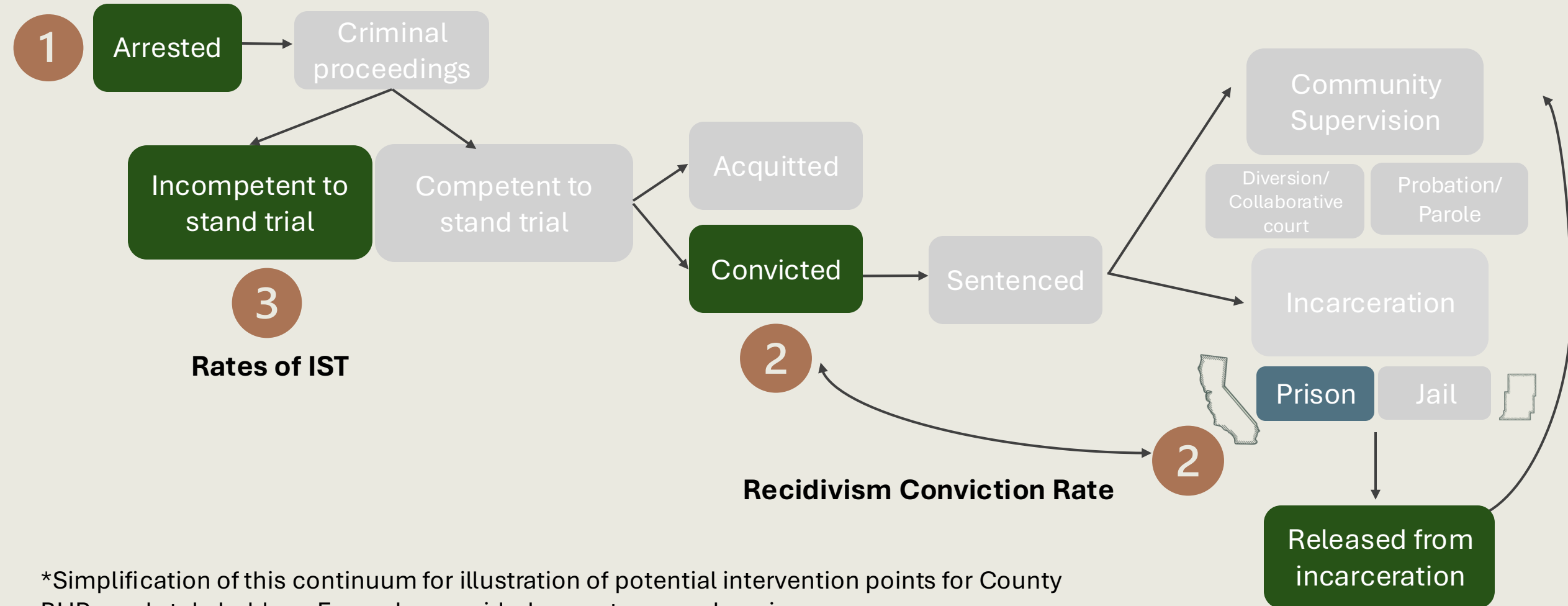
Data rarely captures behavioral health needs

# 1 Arrests: Adults and Juveniles (Rate per 100,000)

*Primary Measure*

How many people per 100,000 county residents were arrested for felonies, misdemeanors, or status offenses*?

* <u>Status offense</u> = Non-criminal act that is considered a violation of the law only because it is committed by a minor. Only included in juvenile rate data.

**Numerator:** Number of people who were arrested in the county for felonies, misdemeanors, or status offenses
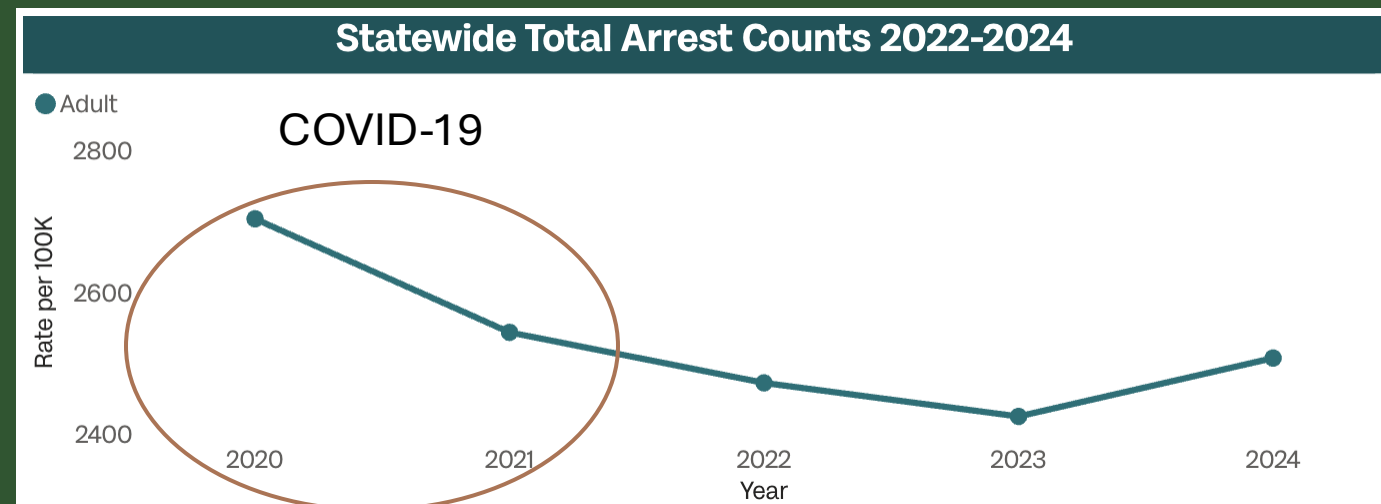
X100,000

**Denominator:** Total county population among Adults (18+) or Juveniles (<18)

Data Source: California Department of Justice

Arrest rates are increasing in the juvenile system, and stable in the adult system.



**Statewide Total Arrest Counts 2022-2024**

COVID-19



**Statewide Total Arrest Counts 2022-2024**

COVID-19

Individuals served
by county
behavioral health

All
individuals
arrested in
your county
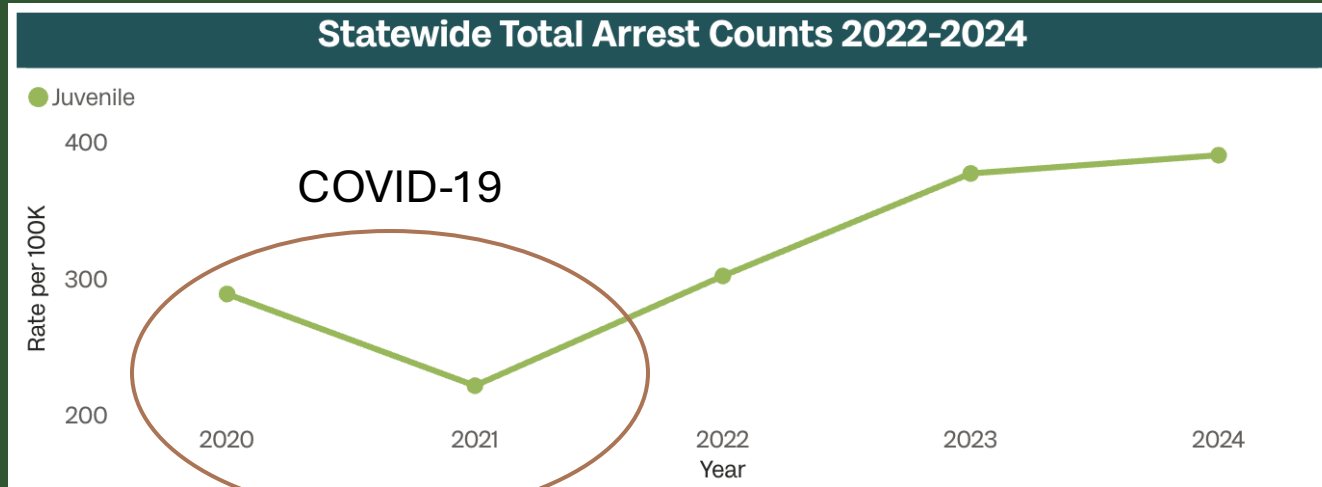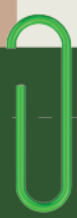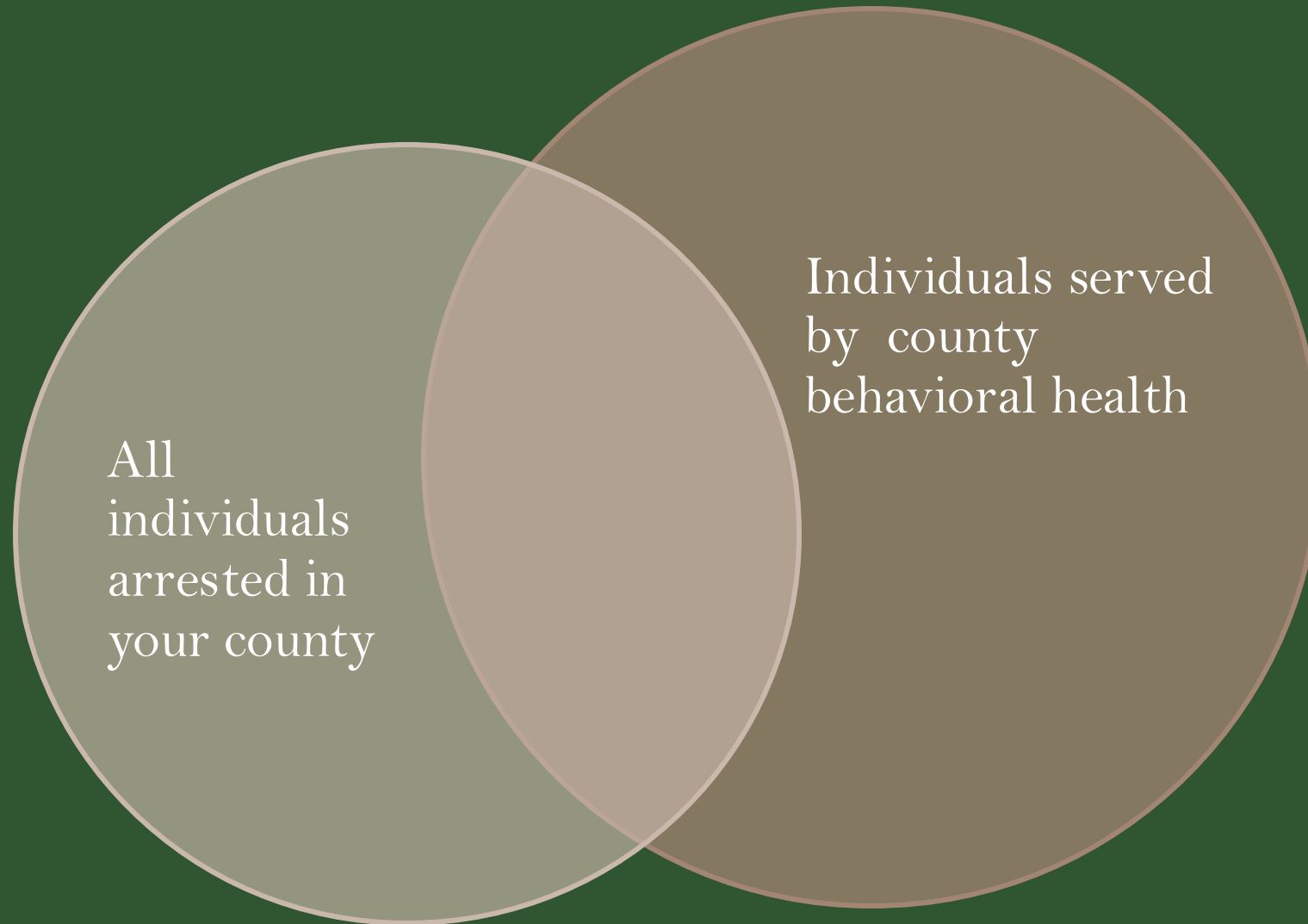
## 2 Adult Recidivism Conviction Rate

*Supplemental Measure*

What percentage of people released from prison were re-convicted within 3 years?*

**Numerator:** People released from CDCR custody who were convicted again within 3 years

**Denominator: People** who were released from CDCR custody by County of Release

*CDCR's primary measure of recidivism is conviction within 3 years, with arrests and returns to prison as supplemental measures.

Data Source: California Department of Corrections & Rehabilitation

# Adult Recidivism Conviction Rates

**Numerator**: Number of people within 1-3 years who are...
- Arrested,
- Received a felony conviction, and
- Sentenced to incarceration in a prison

**Denominator**: Number of people released from prison at Year 0
(same for all estimates)

3-year estimates

2-year estimates

1-year estimates

Year 0

Year 1

Year 2

Year 3

Released from Prison

Arrested and convicted

Arrested and convicted

Arrested and convicted
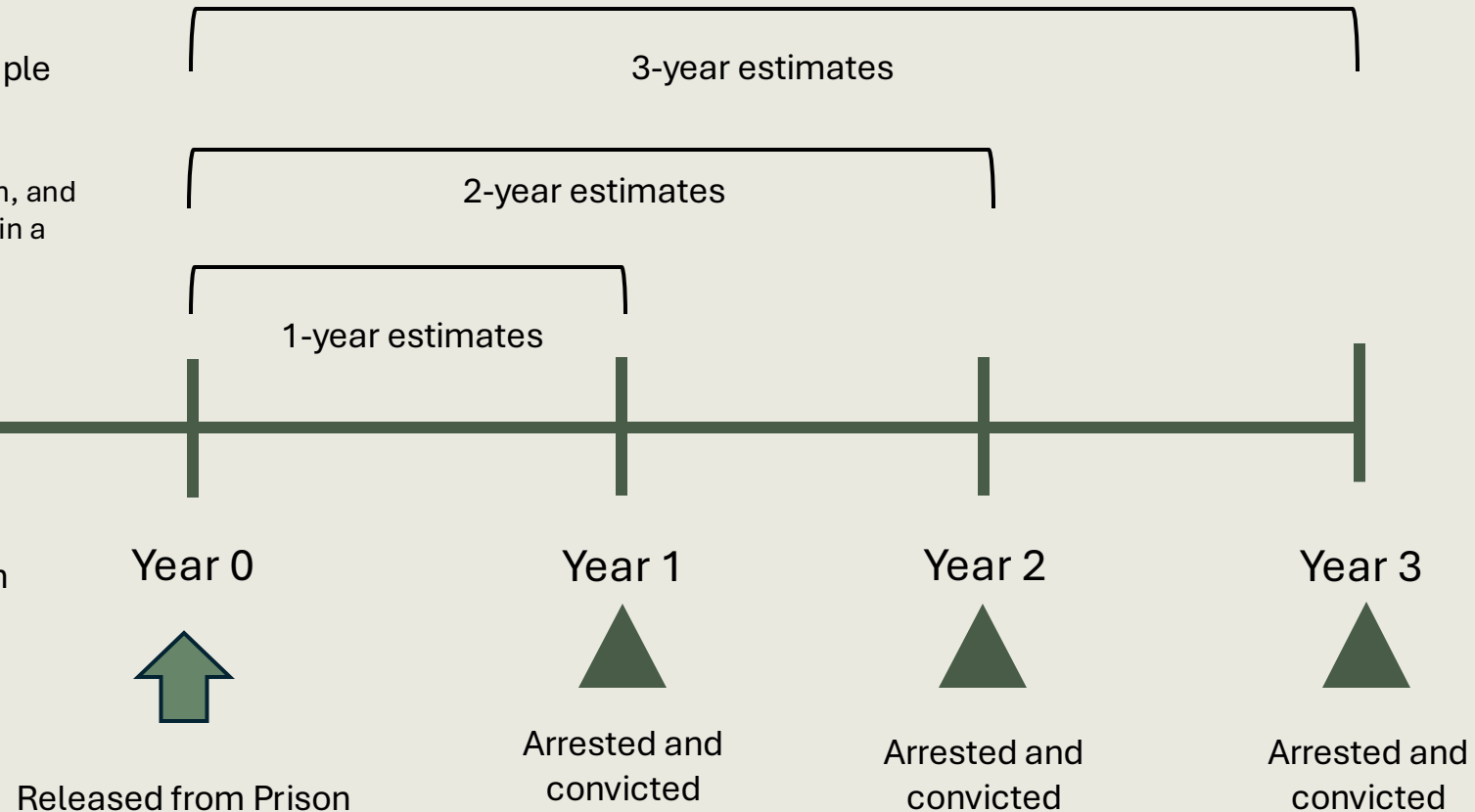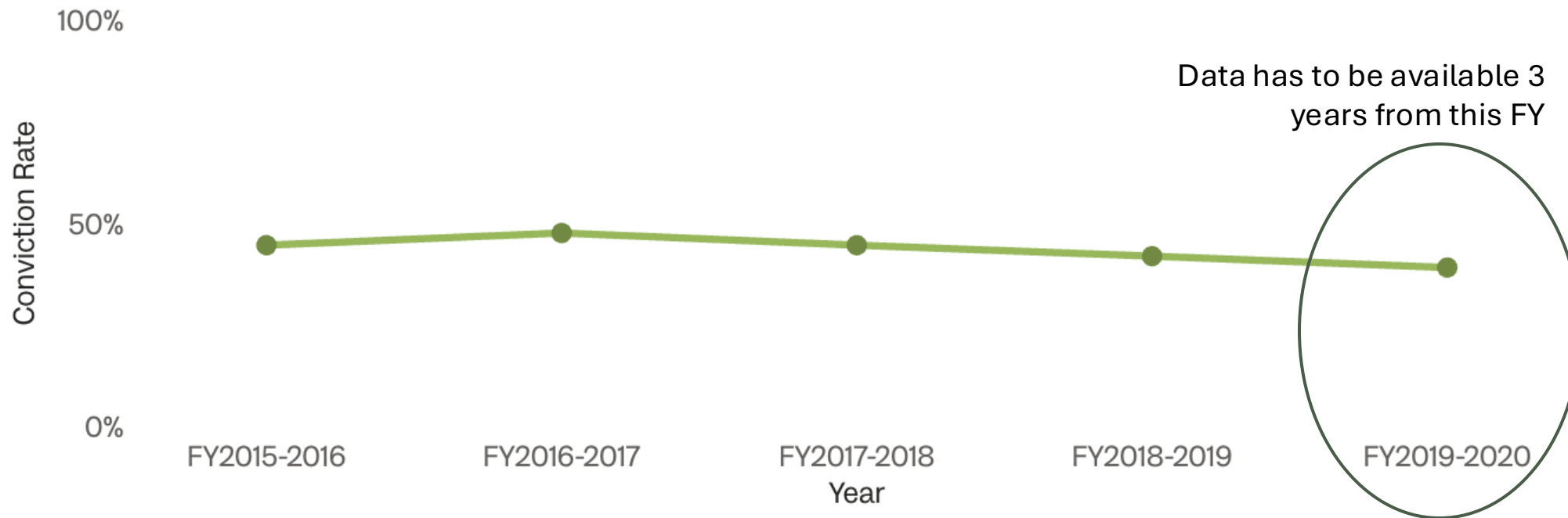
Statewide 3-year conviction recidivism rates are generally stable. Where can you have the greatest impact?
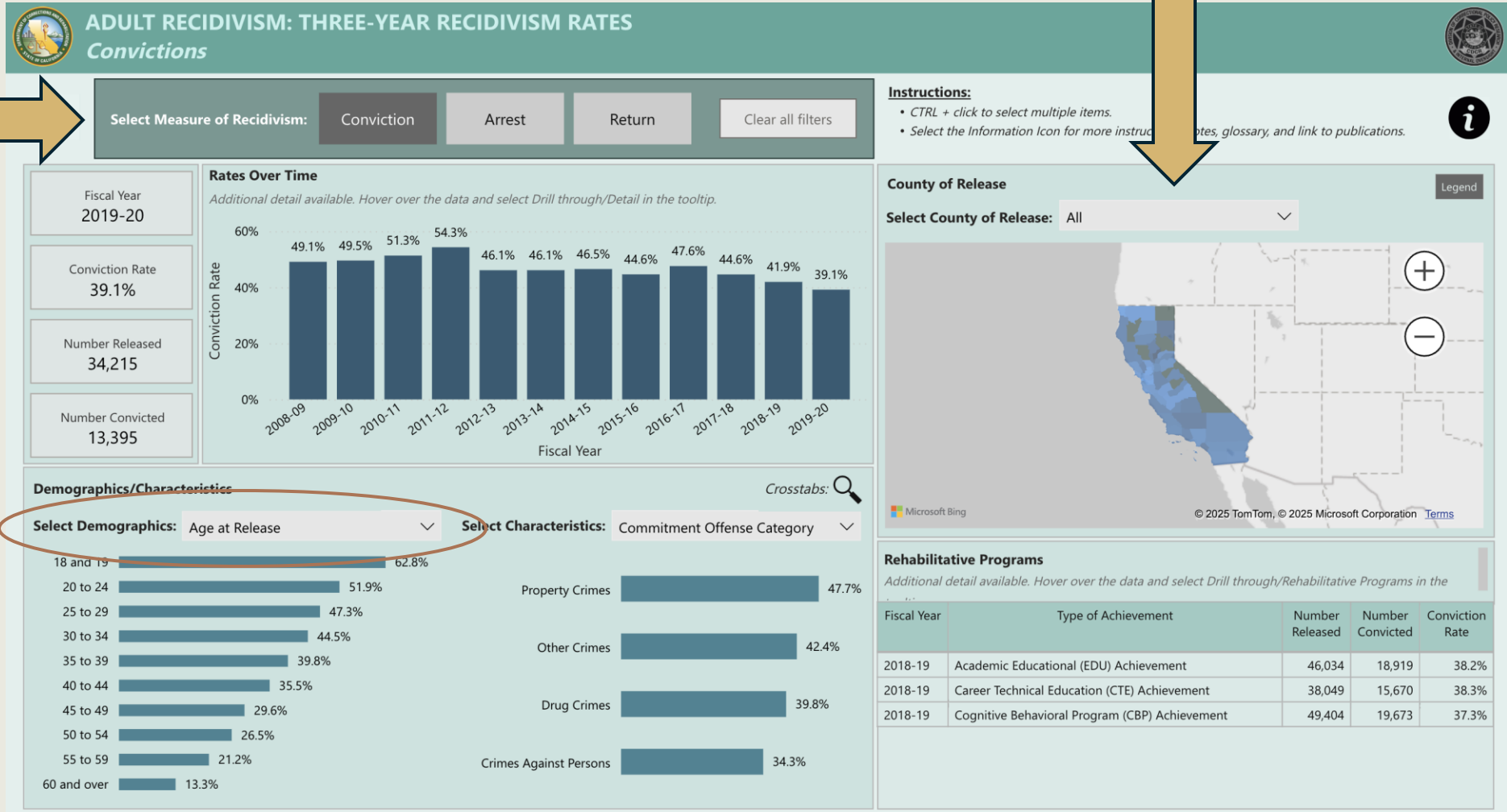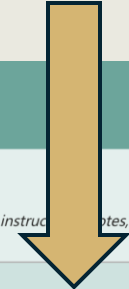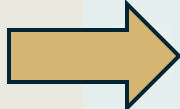
**Statewide Recidivism Conviction Rates FY15-20**



Data has to be available 3 years from this FY

💡Key Insight: This rate has been staying the same over time.

# CDCR Recidivism Dashboard

Select County

Primary & supplemental recidivism measures

Select age, race/ethnicity, or gender

**ADULT RECIDIVISM: THREE-YEAR RECIDIVISM RATES**
*Convictions*

**Instructions:**
- *CTRL + click to select multiple items.*
- *Select the Information Icon for more instructions, notes, glossary, and link to publications.*

**Select Measure of Recidivism:** | Conviction | Arrest | Return | Clear all filters

Fiscal Year **2019-20**

Conviction Rate **39.1%**

Number Released **34,215**

Number Convicted **13,395**

**Rates Over Time**
*Additional detail available. Hover over the data and select Drill through/Detail in the tooltip.*

| Fiscal Year | Conviction Rate |
|---|---|
| 2008-09 | 49.1% |
| 2009-10 | 49.5% |
| 2010-11 | 51.3% |
| 2011-12 | 54.3% |
| 2012-13 | 46.1% |
| 2013-14 | 46.1% |
| 2014-15 | 46.5% |
| 2015-16 | 44.6% |
| 2016-17 | 47.6% |
| 2017-18 | 44.6% |
| 2018-19 | 41.9% |
| 2019-20 | 39.1% |

**County of Release**

Legend

**Select County of Release:** All

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**Demographics/Characteristics**

Crosstabs: 🔍

**Select Demographics:** Age at Release

**Select Characteristics:** Commitment Offense Category

| Age at Release | Rate |
|---|---|
| 18 and 19 | 62.8% |
| 20 to 24 | 51.9% |
| 25 to 29 | 47.3% |
| 30 to 34 | 44.5% |
| 35 to 39 | 39.8% |
| 40 to 44 | 35.5% |
| 45 to 49 | 29.6% |
| 50 to 54 | 26.5% |
| 55 to 59 | 21.2% |
| 60 and over | 13.3% |

| Commitment Offense | Rate |
|---|---|
| Property Crimes | 47.7% |
| Other Crimes | 42.4% |
| Drug Crimes | 39.8% |
| Crimes Against Persons | 34.3% |

**Rehabilitative Programs**
*Additional detail available. Hover over the data and select Drill through/Rehabilitative Programs in the tooltip.*

| Fiscal Year | Type of Achievement | Number Released | Number Convicted | Conviction Rate |
|---|---|---|---|---|
| 2018-19 | Academic Educational (EDU) Achievement | 46,034 | 18,919 | 38.2% |
| 2018-19 | Career Technical Education (CTE) Achievement | 38,049 | 15,670 | 38.3% |
| 2018-19 | Cognitive Behavioral Program (CBP) Achievement | 49,404 | 19,673 | 37.3% |

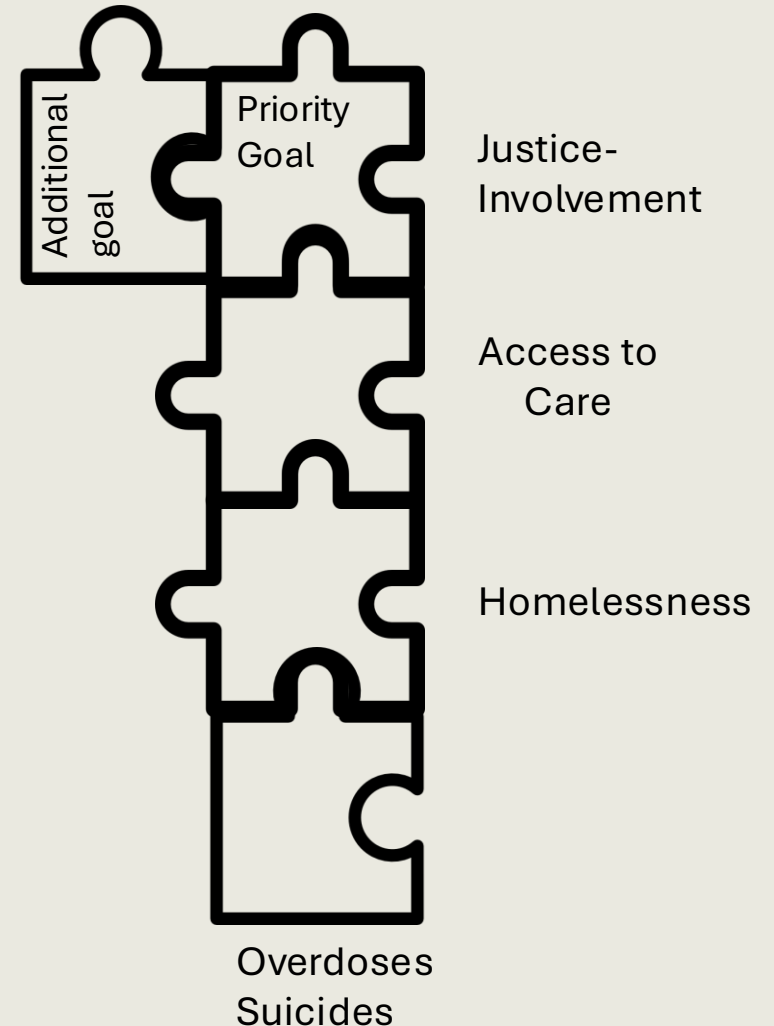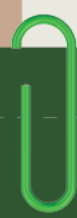*Notes: Recidivism rates are not calculated when the number released is less than 30.*

**CDCR Recidivism Dashboard Link**

# Other Related Measures

- CDCR supplemental recidivism measures:
  - Re-arrests within 1-3 years
  - Return-to-prison within 1-3 years

- Jail-based recidivism measures

- Enrollment in Medi-Cal during incarceration and post-release

- Enrollment in collaborative courts

- Connections to physical health care, MH or SUD treatment during incarceration and post-release

- Reductions in overdoses and suicides during and after incarceration

Engagement in School & Work

Additional goal

Priority Goal

Justice-Involvement

Access to Care

Homelessness

Overdoses Suicides

# 3 Felony Incompetent to Stand Trial (IST) Counts

*Supplemental Measure*

How many people per 100,000 county residents received an initial Incompetent to Stand Trial (IST)* determination while on felony charges?

* Incompetent to Stand Trial = Legal determination that a person is unable to understand the nature of the criminal proceedings or assist in their own defense due to a mental health disorder or developmental disability.

Data Source: California Department of State Hospitals

**Numerator:** Number of people going through felony criminal proceedings in your county who were found IST

**Denominator:** Total county population

# • WHAT

WHY

HUNCHES

| Committing County | Initial Count - FY 2023-24 IST Determinations | FIST Commitments Removed from Count | | | | | | Updated FY 2023-24 IST Determinations | 2023-24 Diversion Offset | |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Program Revokes | Re-Commits | Deaths | Cancelled | Re-Evaluated 1372 | EASS 1372 | | Diversion Credit/Offset | Final Adjusted IST Determinations Count |
| Alameda | 86 | 1 | 3 | 0 | 3 | 3 | 0 | 76 | 1 | 75 |
| Alpine | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | 0 |
| Amador | 8 | 0 | 0 | 0 | 0 | 0 | 1 | 7 | | 7 |
| Butte | 40 | 0 | 1 | 0 | 0 | 0 | 1 | 38 | | 38 |
| Calaveras | 8 | 0 | 1 | 0 | 0 | 0 | 0 | 7 | | 7 |
| Colusa | 5 | 0 | 1 | 0 | 0 | 0 | 1 | 3 | | 3 |
| Contra Costa | 109 | 3 | 17 | 0 | 1 | 3 | 0 | 85 | 1 | 84 |
| Del Norte | 11 | 0 | 0 | 0 | 0 | 0 | 2 | 9 | | 9 |
| El Dorado | 21 | 0 | 2 | 0 | 0 | 0 | 5 | 14 | | 14 |
| Fresno | 200 | 1 | 5 | 2 | 4 | 0 | 26 | 162 | | 162 |
| Glenn | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | | 1 |
| Humboldt | 48 | 0 | 5 | 0 | 0 | 0 | 2 | 41 | | 41 |
| Imperial | 33 | 0 | 0 | 0 | 0 | 0 | 2 | 31 | | 31 |
| Inyo | 3 | 0 | 0 | 0 | 0 | 0 | 0 | 3 | | 3 |
| Kern | 193 | 0 | 13 | 0 | 2 | 2 | 1 | 175 | | 175 |
| Kings | 46 | 0 | 2 | 0 | 0 | 0 | 4 | 40 | | 40 |
| Lake | 19 | 0 | 1 | 0 | 0 | 0 | 2 | 16 | | 16 |
| Lassen | 4 | 0 | 0 | 0 | 0 | 0 | 0 | 4 | | 4 |
| Los Angeles | 1,814 | 84 | 157 | 0 | 21 | 72 | 0 | 1,480 | 160 | 1,320 |
| Madera | 26 | 0 | 0 | 0 | 0 | 0 | 5 | 21 | | 21 |
| Marin | 33 | 1 | 0 | 0 | 0 | 1 | 0 | 31 | | 31 |

| Supplemental Measure | |
|---|---|
| County Name | Incompetent to Stand Trial (IST) Count, Rate per 100,000 |
| Statewide Rate | 14.3 |
| Statewide Median | 17.7 |
| Alameda | 5.3 |
| Alpine | 0.0 |
| Amador | 19.1 |
| Butte | 19.3 |
| Calaveras | 17.2 |
| Colusa | 22.7 |
| Contra Costa | 9.4 |
| Del Norte | 41.4 |
| El Dorado | 10.9 |
| Fresno | 19.7 |
| Glenn | 3.6 |
| Humboldt | 35.8 |
| Imperial | 18.4 |
| Inyo | 16.2 |
| Kern | 21.1 |
| Kings | 30.1 |
| Lake | 28.0 |

**Data Source:**
California Department of State Hospitals

*Reported in counts*

**County Population-Level Behavioral Health Measure Workbook**

*Data converted to a rate per 100,000 residents utilizing data from the U.S. Census Population Estimates Program*

# Felony Incompetent to Stand Trial (IST) Counts

**This measure counts individuals in these circumstances:**

- Have been charged in your county with a felony, or alleged to have violated the terms of probation for a felony, or mandatory supervision

- Court finds that they are unable to understand the nature of the criminal proceedings or assist in their own defense due to a mental health disorder or developmental disability

- Criminal proceedings pause

# Felony IST Counts - Considerations
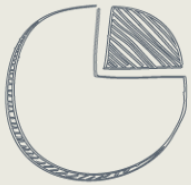
## Snapshot of a single step in the IST process

- Captures: initial court determination of IST in felony cases

- Does not capture: Next steps (e.g., re-evaluations)
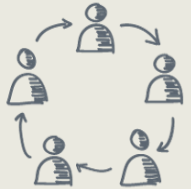
## Excludes behavioral health outcomes for people found IST
- Long term recovery outcomes
- Success rates of alternative placements (e.g., diversion)
- Linkages to county services (e.g., substance use services)
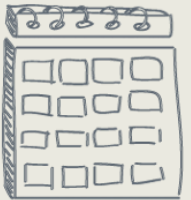
## Doesn't fully capture timing and system utilization
- Length of stay, time to placement
- Re-arrest or new charges
- Cumulative system burden (e.g., multiple admissions)

## Data quality and linkage challenges
- Difficulty linking episodes
- Tracking across siloed sectors

# Geographic Considerations

## Arrest Rates

**1**

County where Arrest Occurred

Could include…

County residents who are arrested in your county
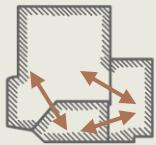
People visiting your county who get arrested in your county

## Recidivism Rates

**2**

County of Release

Could include…

County residents who are charged with a felony and incarcerated
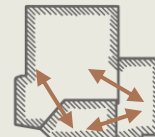
Individuals who are released to your county and move to a different county within 3 years

People released from prison who establish residence in your county

## Rates of Felony IST

**3**

County where Arrest Occurred + Felony Charge

Could include…

County residents who are arrested and charged with a felony
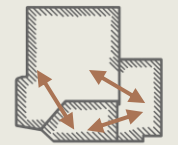
People visiting your county who get arrested for a felony in your county

# Data Snack: Considering Intersectionality

Although people who are female gender are less likely to be arrested...



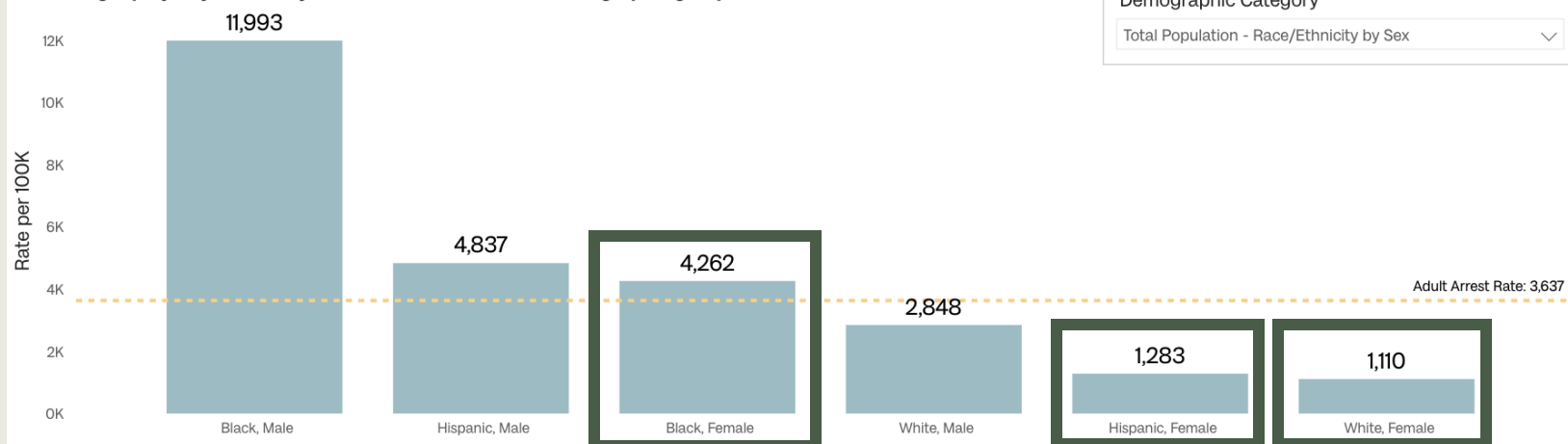**Fresno County 2023 Total Arrests per 100,000 People by Adult - Sex**

Measuring Equity: Is your county-level rate the same for all demographic groups?

Demographic Category
All

Rate per 100K

5,534 (Male)

1,580 (Female)

Adult Arrest Rate: 3,637
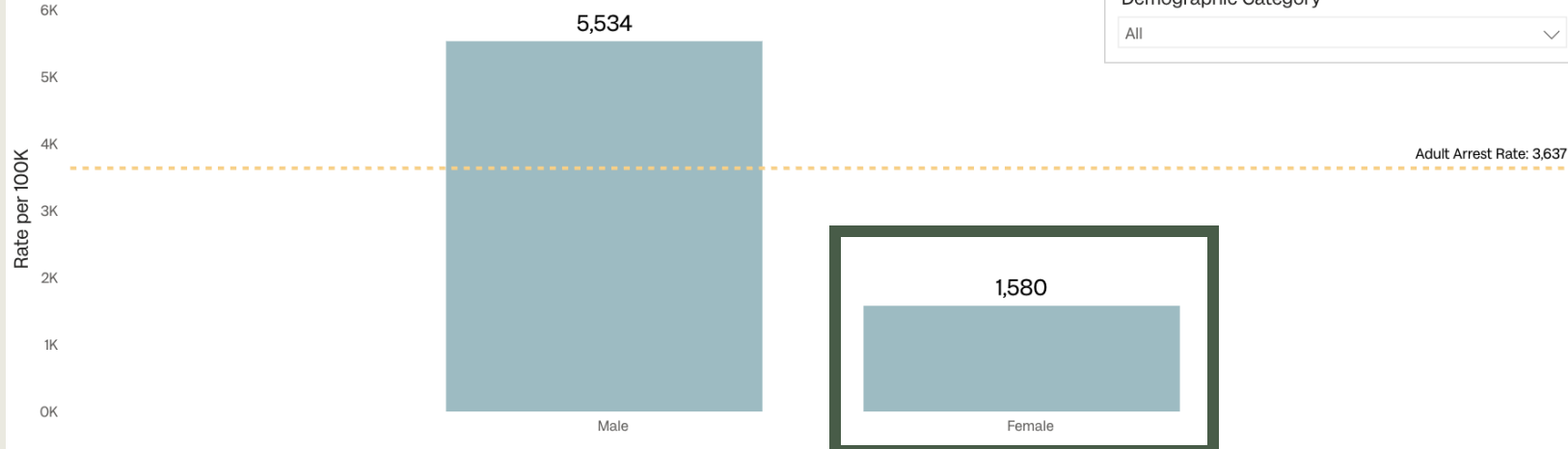
Black women are more likely to be arrested than other racial/ethnic groups

**Fresno County 2023 Total Arrests per 100,000 People by Total Population - Race/Ethnicity by Sex**

Measuring Equity: Is your county-level rate the same for all demographic groups?

Demographic Category
Total Population - Race/Ethnicity by Sex

Rate per 100K

11,993 (Black, Male)

4,837 (Hispanic, Male)

4,262 (Black, Female)

2,848 (White, Male)

1,283 (Hispanic, Female)

1,110 (White, Female)

Adult Arrest Rate: 3,637

# CalMHSA Dashboards

**BHT Data Explainer Series**

*Weekly webinars and office hours*
July 29 - September 30

CalMHSA

CalMHSA is hosting an educational series through Sept. 30 to support counties in advancing California's statewide behavioral health goals and population-level measures under the Behavioral Health Services Act. The webinars and corresponding office hours will help counties incorporate these goals into Integrated Plans and strengthen data-informed strategies that improve population health outcomes. *Please note: Live participation in the series is only for county behavioral health staff.*

Visit this web page for links to recordings of each webinar, printable resource materials, and data dashboards as they are developed.

Each week's offering will focus on one or a related grouping of statewide goals and measures and examine them through:

- **Webinars (Tuesdays, 12-1 p.m.):** Focused on understanding the data, including statewide performance metrics, system context, and county health equity and disparity considerations

- **Office Hours (Fridays, 12-1 p.m.):** A collaborative, open forum for discussion and cross-county learning
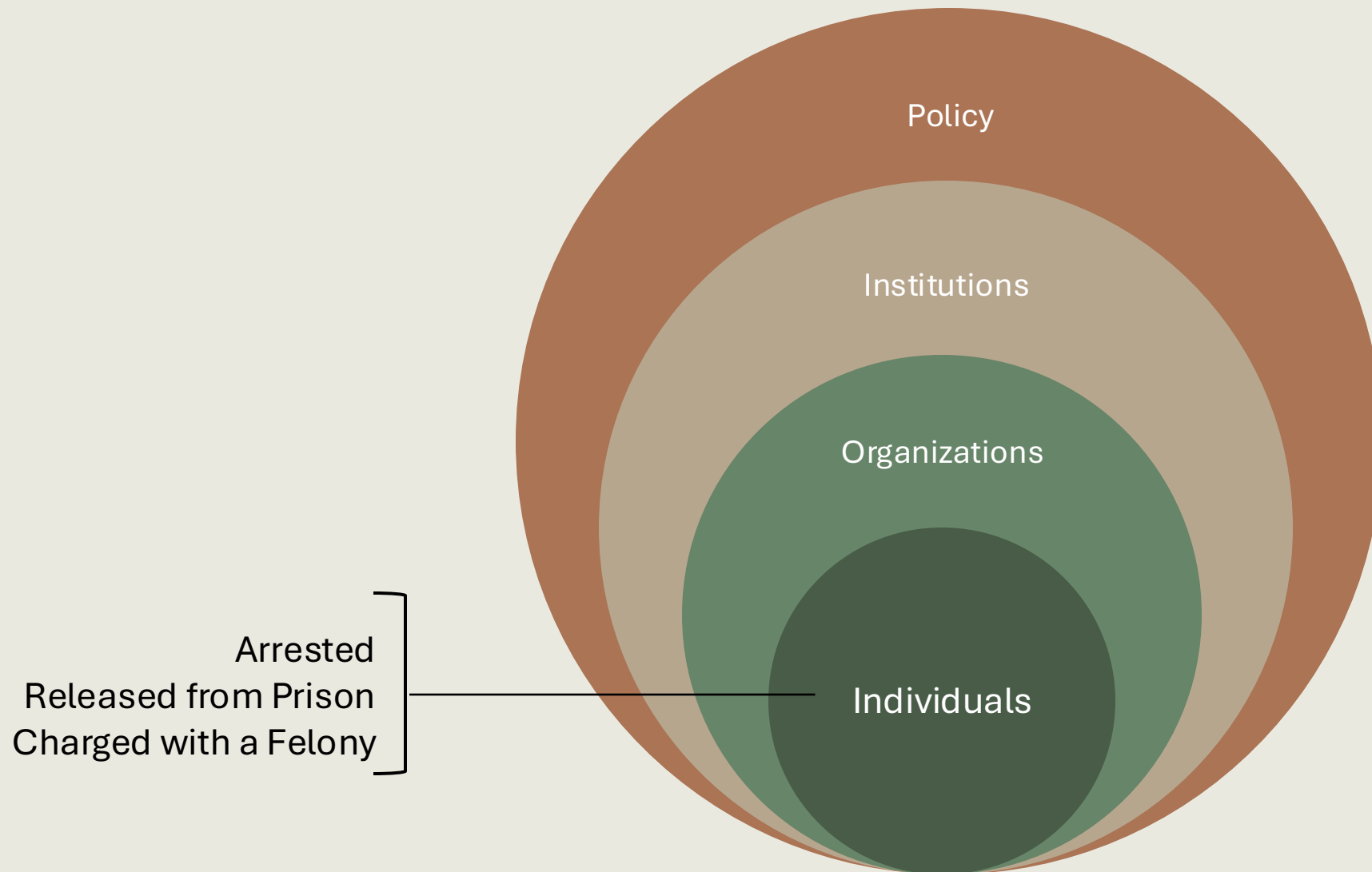
**CONTENTS**

Webinars   +

Data Dashboards   +

BHT Planning Documents   +

# Think about your sphere of influence, and what other entities you will need to work with.

Policy

Institutions

Organizations

Individuals

# Individuals

Policy

Institutions

Organizations

Arrested
Released from Prison
Charged with a Felony
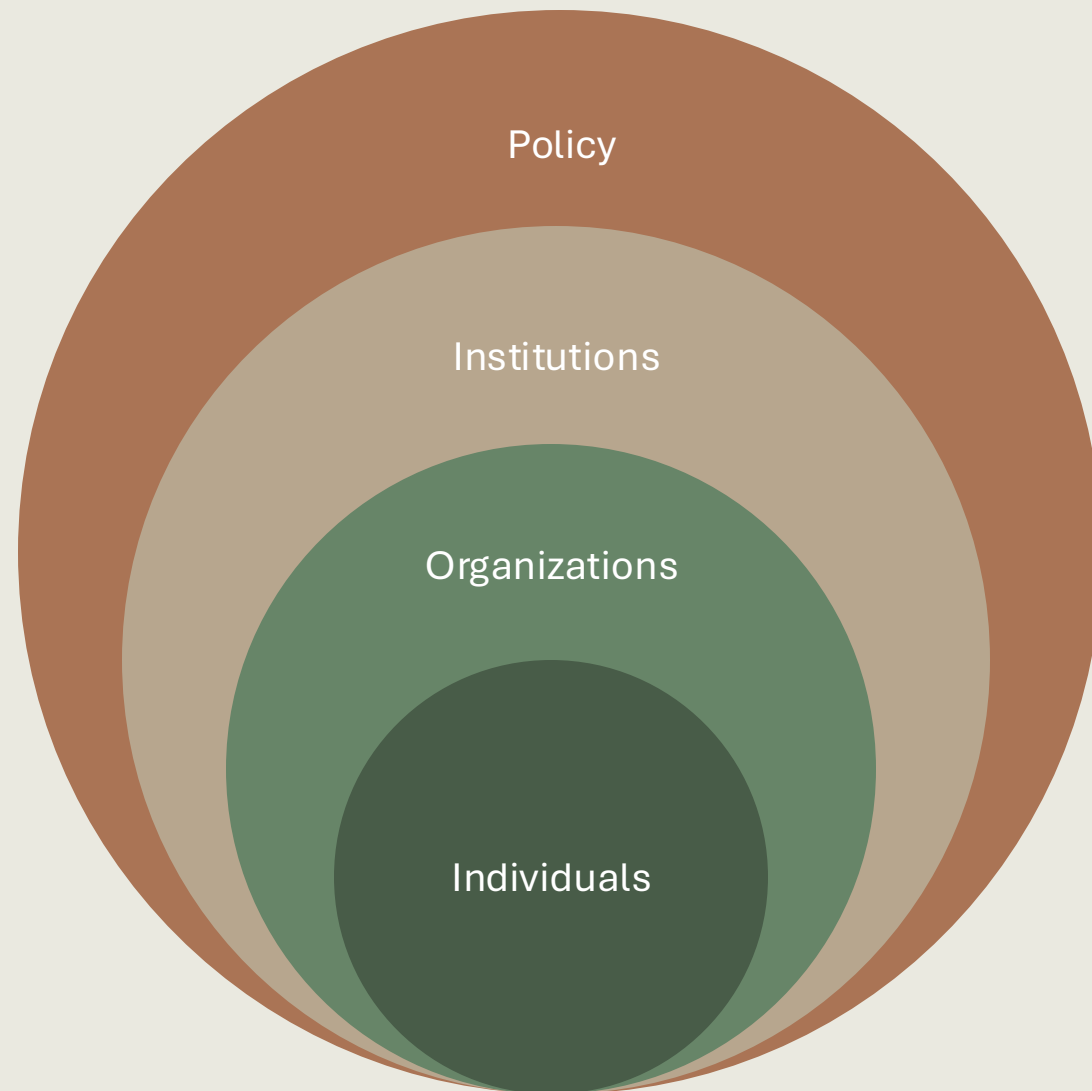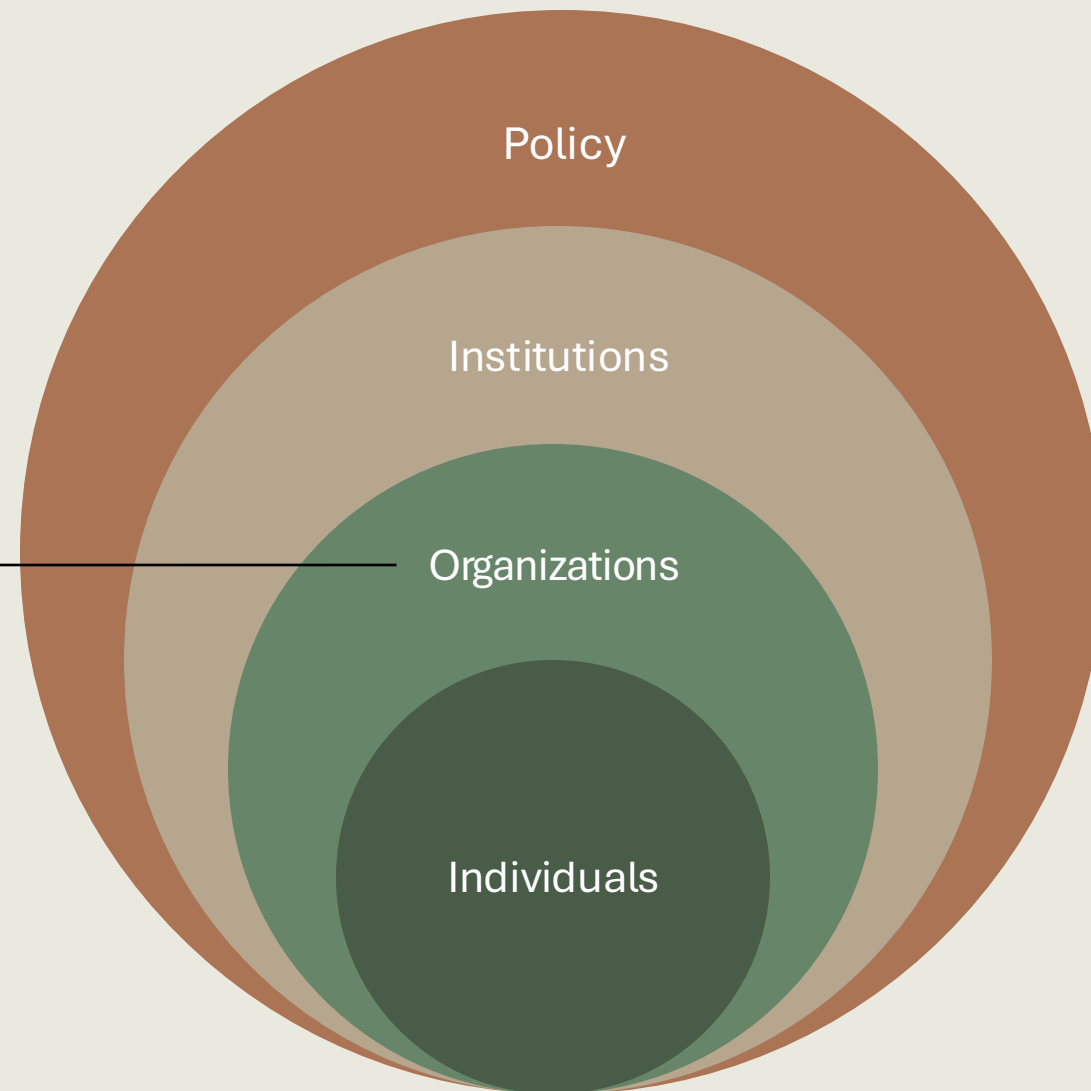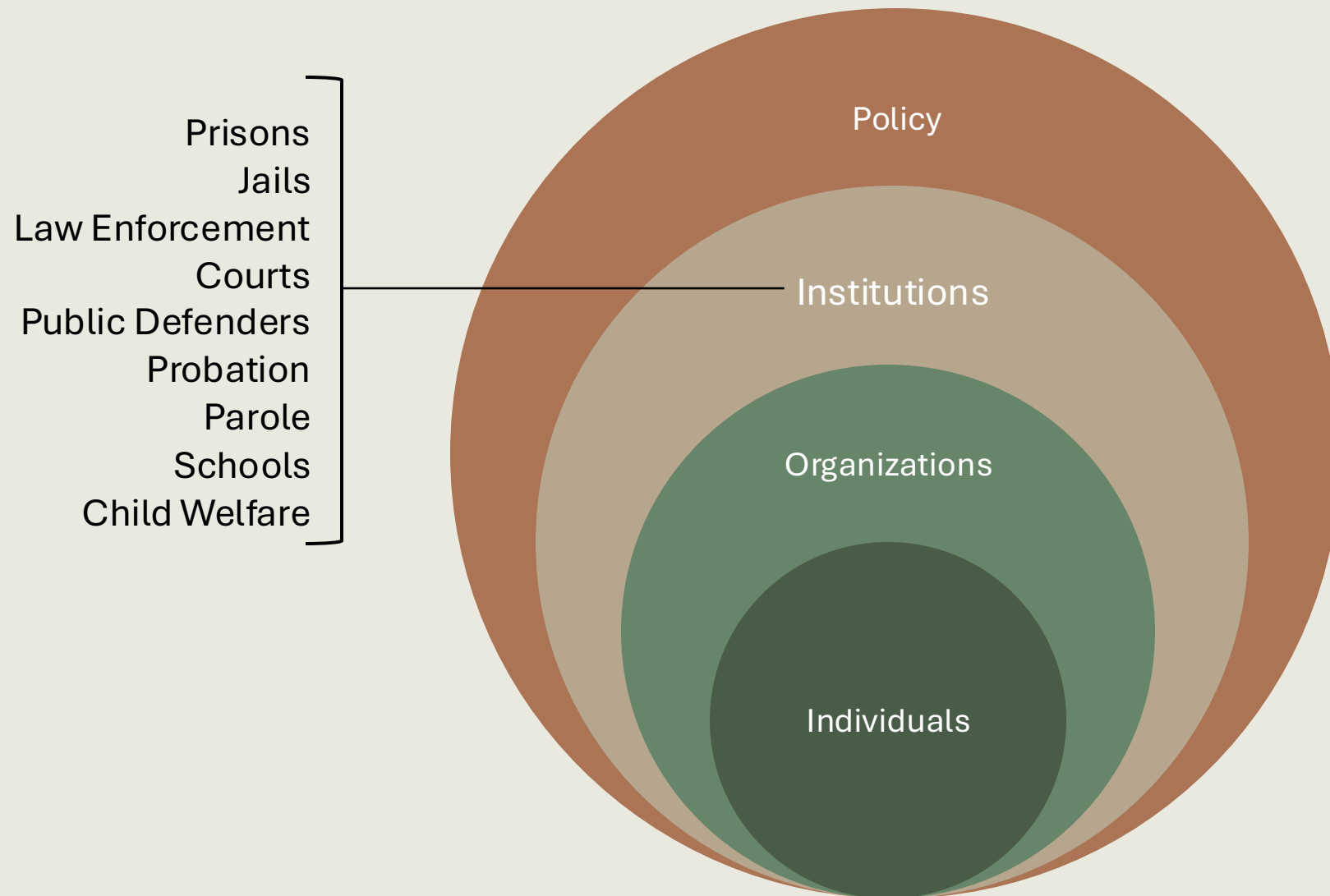
Individuals

# Organizations

BHP and MCP Networks
County Service Providers
CBOs
Managed Care Providers
MHPs
DMC/DMC-ODS Plans
Managed Care Plans

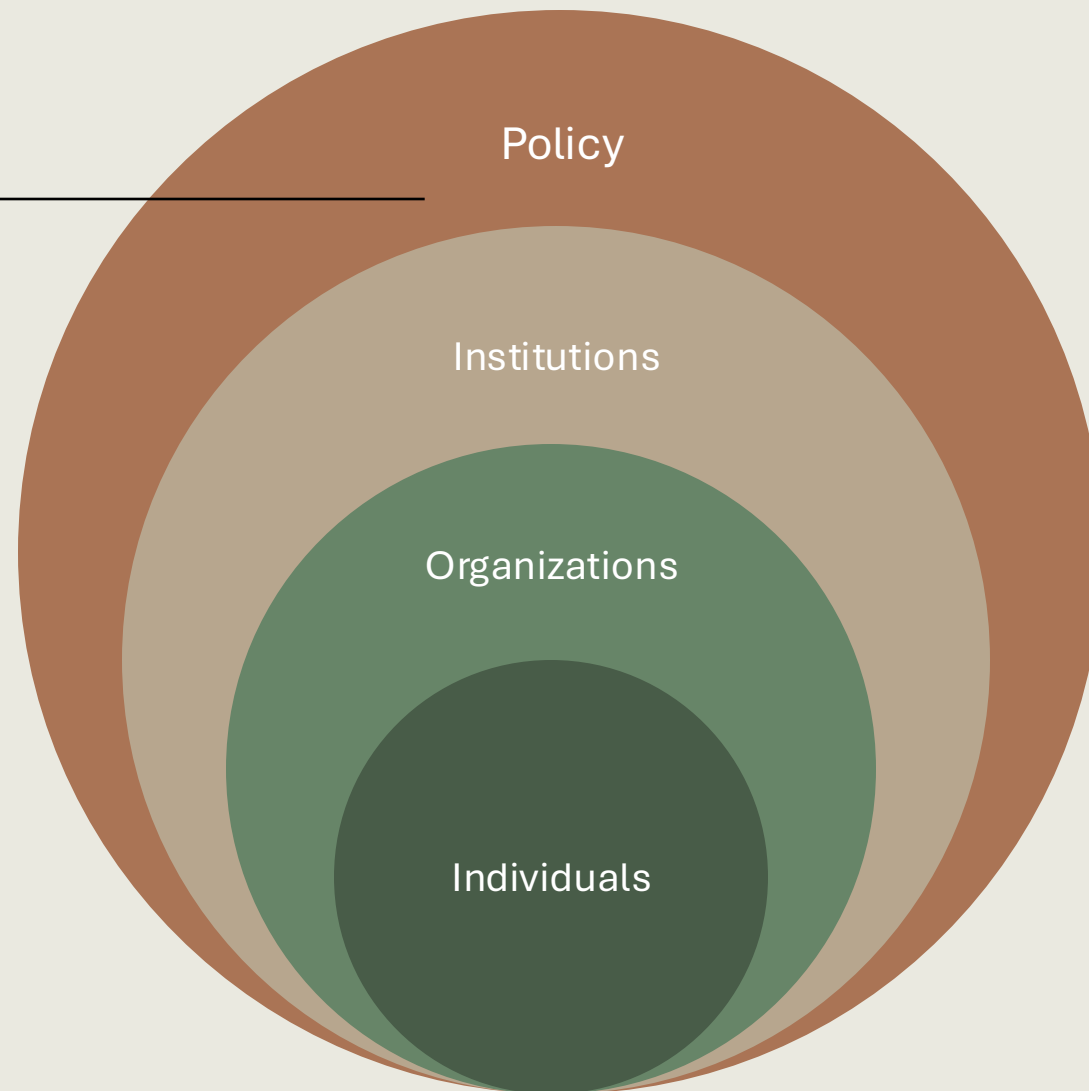Policy

Institutions

Organizations

Individuals

# Institutions

Prisons
Jails
Law Enforcement
Courts
Public Defenders
Probation
Parole
Schools
Child Welfare

Policy

Institutions

Organizations

Individuals

# Policy

Changes in Laws, Statutes, and Ordinances
State-Funded Justice & BH Initiatives
Reforms in IST & Forensic Processes
Funding Mechanisms & Incentives
Data-Sharing & Confidentiality Regulations

Policy

Institutions

Organizations

Individuals

# Why?

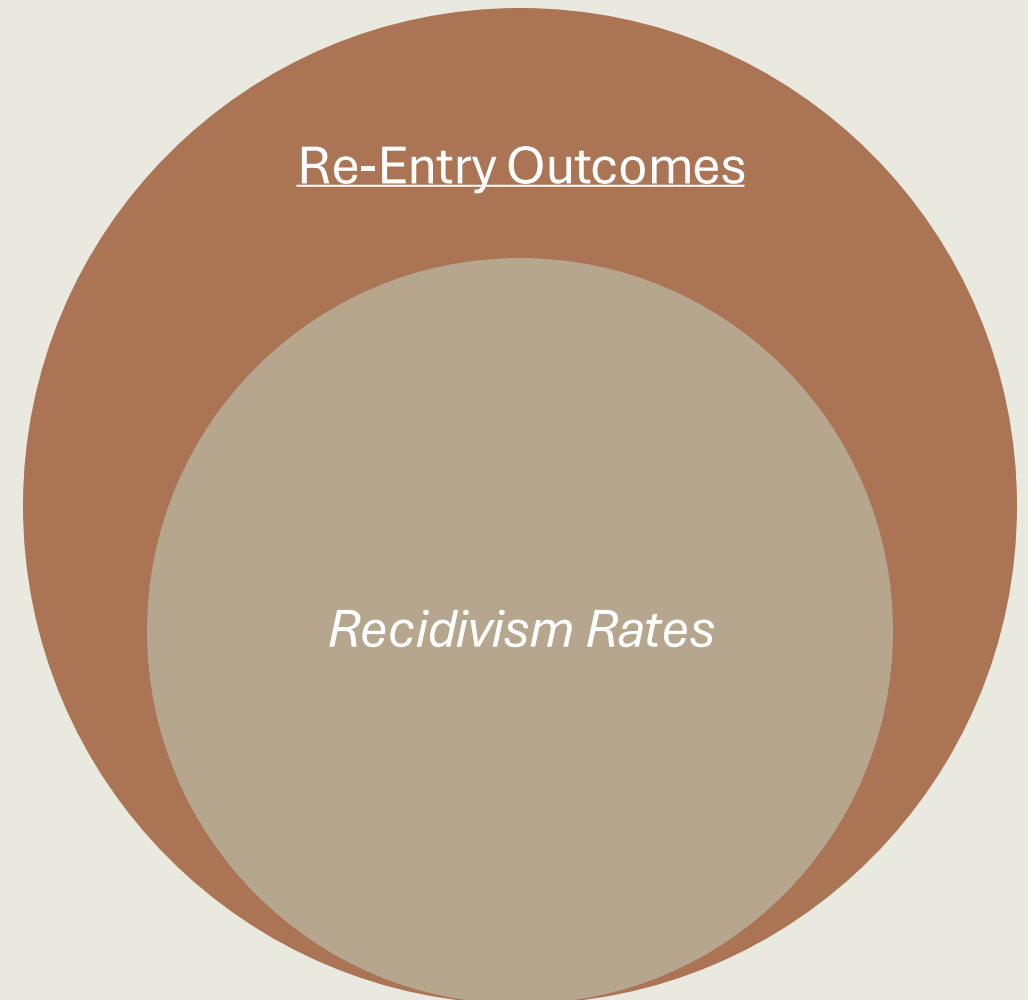# Arrest Rates in Context

**Many factors influence arrest rates, including:**

- Policing practices
- Criminal justice reforms
- Homelessness and related policy responses
- Drug policy and regulation
- Crisis intervention and outreach program availability

**This measure is one indicator of how a county's justice system is operating.**

However, because it captures data that is broader than the scope of the statewide goal around Justice Involvement, "noise" must be eliminated to isolate trends tied specifically to behavioral health.

Arrest Rates

Justice System Entry for Individuals with BH Needs
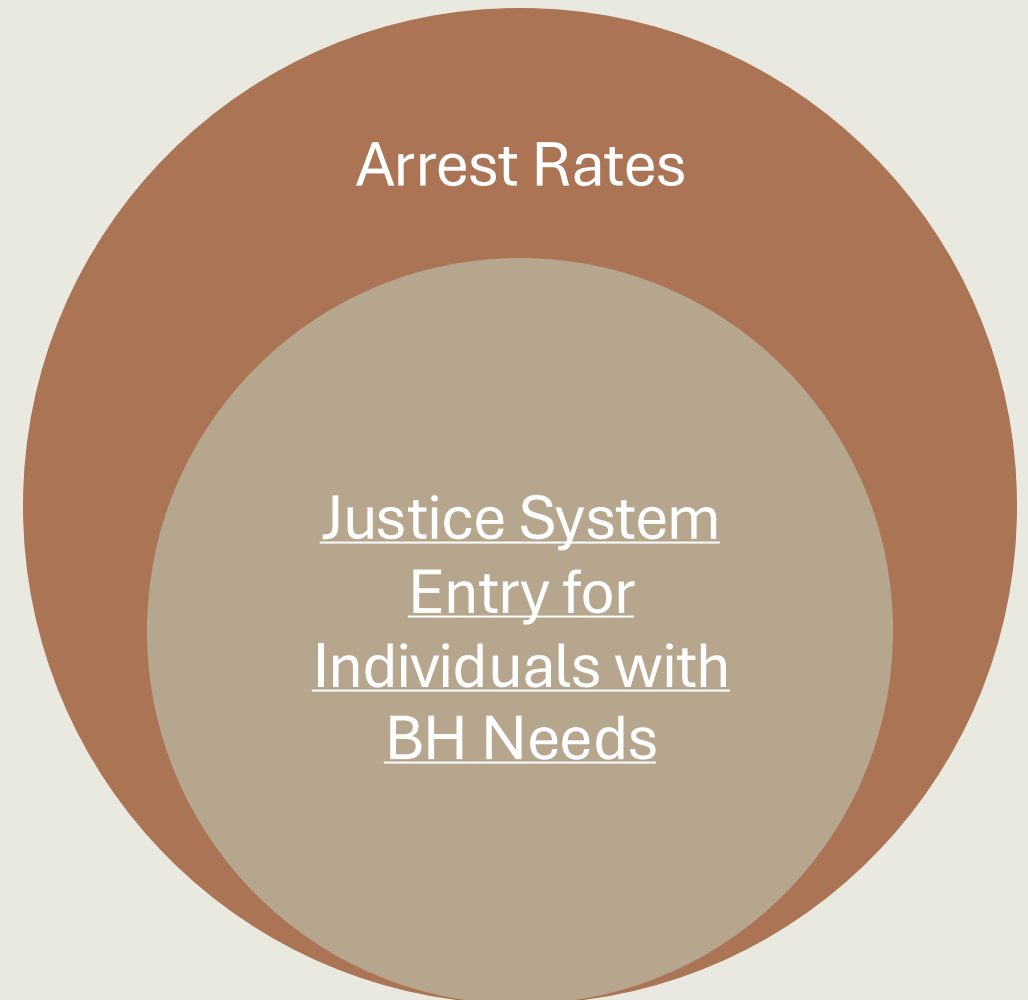
# Recidivism Rates in Context

**Factors influencing recidivism rates include:**

- *Policing practices*
- *Criminal justice reforms*
- *Homelessness and related policy responses*
- *Drug policy and regulation*
- *Crisis intervention and outreach program availability*

*Similar to arrest rates*

- Re-entry program availability and effectiveness

Re-Entry Outcomes

*Recidivism Rates*

# Recidivism Rates in Context

**Re-entry outcomes** are the bigger picture of the story that recidivism rates begin to tell. After release from prison, are individuals with behavioral health needs…

**Access to Care**
Priority Goal

**Homelessness**
Priority Goal

**Overdoses and Suicides**
Additional Goal

**Engagement in School & Work**
Additional Goal

… connected to SMHS/NSMHS and substance use services?

… exiting to housing?

…overdosing or dying by suicide at higher rates?

… engaging in meaningful activity through re-entry programs?
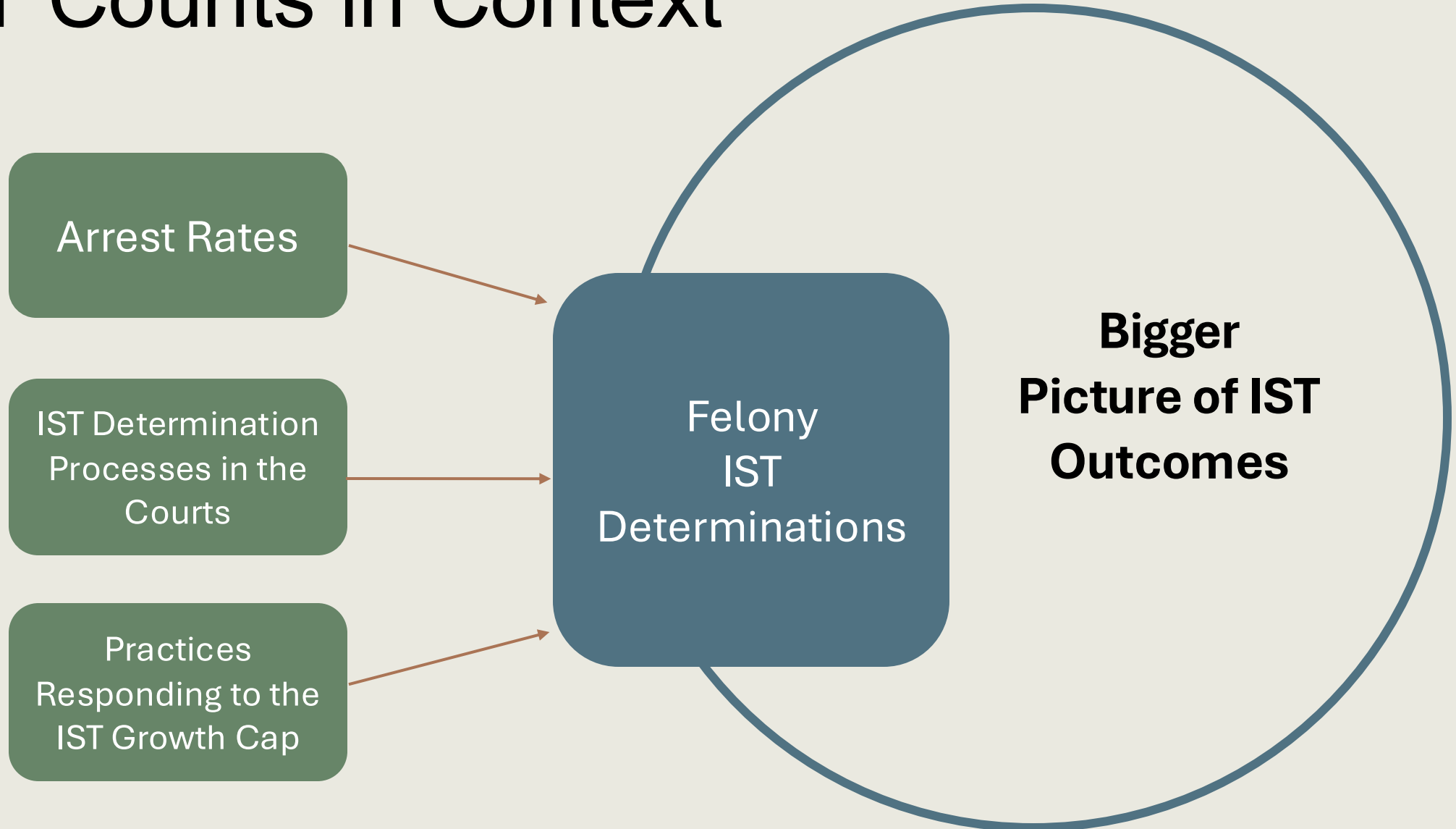
# IST Counts in Context

To impact IST rates, we can focus on both preventing arrests in the first place and improving support after someone is determined to be IST.

**Preventing Arrest**

**Post-Determination**

# IST Counts in Context

**Questions to ask yourself:**

## Preventing Arrest

- **Crisis response and outreach**:
Are our programs successfully intervening *before* the potential arrest of people who would be found IST?

- **Coordination**:
How are we coordinating with law enforcement to prevent arrest for this population?

## Post-Determination

- **Diversion to services**:
When individuals found felony IST are ordered to programs like diversion, AOT, CARE Court, or conservatorship, do we have the program capacity to serve them?

- **Competency restoration**:
How often are people sent to competency restoration programs being successfully restored to competence?

- **Release to county custody**:
When individuals found IST are released back to county on time served or dismissed charges, how successfully are we transitioning them into services, behavioral health programs, housing, and more?

# Hunches

# Your Integrated Plan Must Include

**Priority Area:** The main focus or theme you're working on to create impact.

**Problem Statement:** A clear, concise explanation of the challenge you're trying to solve.

**Goal:** The desired outcome or change you want to achieve.

**Target Populations:** The specific group(s) of people your work is meant to serve or affect.

**Strategies:** The approaches or methods you'll use to reach your goal.

**Key Outcomes:** The measurable results that show progress or success.

*And today we'll show you examples of what this might look like.*
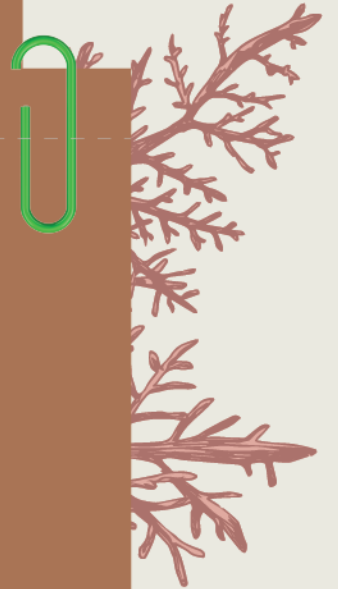
# What are Hunches?

- Hunches are *early* **theories about what we might do next** based on what we see in the data and sphere of influence.

- Hunches can be framed as **"What if..." statements that express** ideas and guide conversation.

- They're not final answers — they're **starting points** for dialogue, planning, and collaboration.

Example hunch:

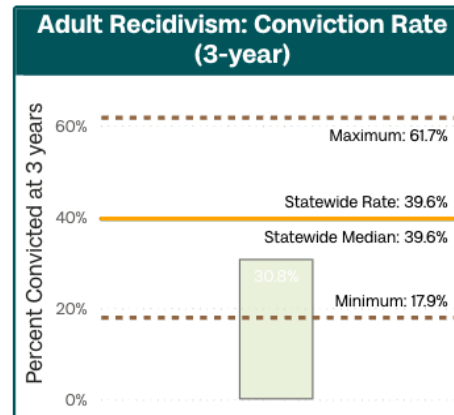**What if** we partnered with schools and MCPs to expand behavioral health screening and referral programs for youth at risk of arrest?
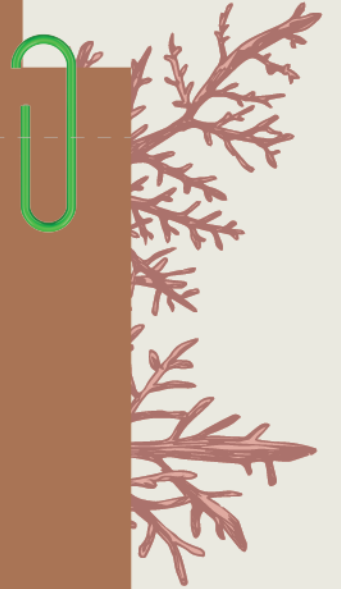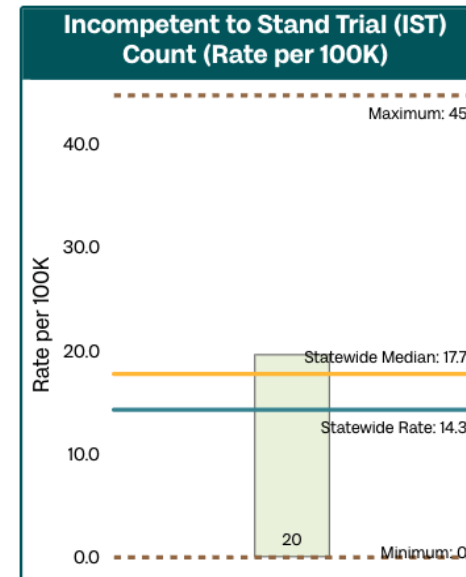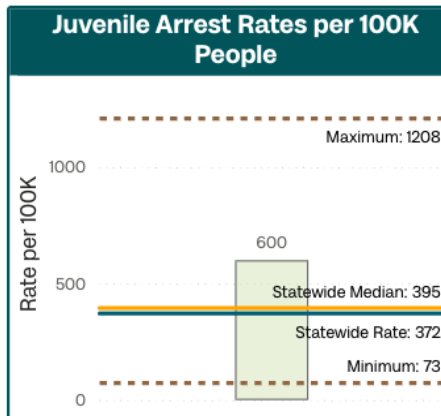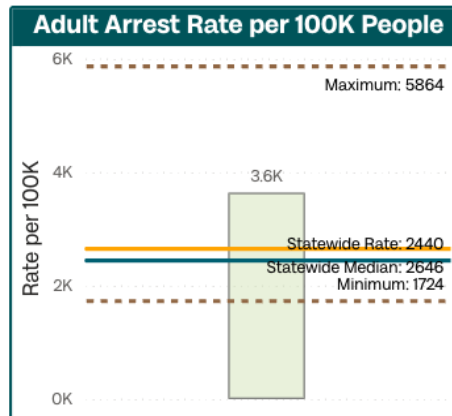
# County Example: Fresno

# Fresno County Overview: Justice Involvement

| Measure | State Rate | Fresno County Rate | Equity-Stratified Data |
|---|---|---|---|
| Adult Arrest Rate | 2,440 | 3,637 | Black males (11,993), Hispanic males (4,837), Black females (4,262), Black all (8,198), Ages 30-39 (6,063), Ages 20-29 (4,992), Adult males (5,534) |
| Juvenile Arrest Rate | 372 | 600 | Male youth (983) |
| Adult Recidivism Conviction Rate (3-Year) | 39.6% | 30.8% | Black (35.4%), Ages 20-24 (41%), Ages 25-29 (39%), Ages 30-34 (34%) |
| Incompetent to Stand Trial (IST) Counts | 14.3 | 19.7 | N/A |

# Measuring Equity

**What is the intended impact?** Identify determinants associated with the measure.

**Which populations are most affected?** Compare sub-groups to county average and to each another.

**Why might you be seeing this result?** Examine potential causes of the result you're seeing.

**How do you want to make an impact?** Set specific goals based on inequities identified and locus of control.

**Are you meeting your goals?** Monitor progress and adjust when needed, including discussions and feedback from affected communities.

# Example 1: Fresno's Arrest Rate is High–and Racial and Gender Disparities Persist

**Observation**: Fresno County's adult arrest rate is 3,637 per 100,000—well above the statewide rate (2,440) and median (2,646). Juvenile arrests are also elevated at 600 per 100,000, compared to the state average of 372. When disaggregated, the data shows clear disparities: Black residents—especially men and women—face significantly higher arrest and conviction rates. Young adults (20–39) and Hispanic males are also disproportionately impacted.

**Hunches**:

- What if we partnered with schools, probation, and MCPs to expand behavioral health screening, referral, and early intervention programs for youth at risk of arrest?

- What if we offered peer-led engagement and community-based stabilization services for adults with SMI or SUD who frequently encounter law enforcement?

- What if we partnered with trusted CBOs serving Black and Hispanic communities to inform and deliver outreach in ways that build trust and increase engagement?

- What if we worked with justice partners, MCPs, and Path-JI programs to better understand disparities in arrest and recidivism—and co-design more equitable diversion and treatment pathways?

# Example BHSA Integrated Plan: Advancing Equity Through BH and Justice Collaboration

**Problem Statement:** Fresno County's adult and juvenile arrest rates are significantly higher than statewide benchmarks. Black, Hispanic, and young male residents are overrepresented across arrest and recidivism measures.

**Goal:** Reduce arrest and recidivism rates among overrepresented populations by expanding upstream behavioral health supports, leveraging MCP and Path-JI resources, and strengthening partnerships with trusted community organizations.

**Target Populations:** Black, Hispanic, and young adult residents (ages 20–39) with SMI or SUD and youth at risk of justice involvement.

**Strategies:**

• Partner with schools, probation, and MCPs to expand behavioral health screening and referral for youth at risk of arrest.

• Implement peer-led, community-based stabilization and crisis services for individuals with SMI/SUD.

• Work with trusted community organizations that serve Black and Hispanic residents to co-design culturally responsive outreach and services and expand reach in high-arrest neighborhoods.

• Collaborate with justice partners, MCPs, and Path-JI providers to share and analyze data that identifies racial and gender disparities in arrest and recidivism, and co-design equity-driven solutions.

**Key Outcomes:**

• Reduced arrest and recidivism rates among target populations

• Increased access to culturally responsive, community-based behavioral health supports

• Stronger alignment between behavioral health, MCPs, Path-JI, and justice system partners

# Example 2: Fresno has Higher than Average IST Rate

**Observation**: Fresno County's rate of individuals found felony incompetent to stand trial (IST) is 19.7 per 100,000—higher than both the statewide rate (14.3) and median (17.7).

**Hunches**:

- What if we collaborated with justice system partners to analyze who is being found IST in our county—and what their pathways into the system look like?

- What if we expanded targeted mobile crisis response or community-based services to prevent arrests among individuals at high risk of being found IST?

- What if we used Sequential Intercept Mapping (SIM) with justice, health, and community partners to identify earlier points for behavioral health diversion or support, especially pre-booking or pre-trial?

# Example BHSA Integrated Plan: Reducing IST Through Early BH Intervention

**Problem Statement:** Fresno's felony IST rate (19.7 per 100,000) exceeds both the statewide rate (14.3) and median (17.7).

**Goal:** Reduce IST referrals by expanding early behavioral health interventions and improving coordination with justice partners to identify and support individuals at risk of IST.

**Target Populations:** Adults with serious mental illness at risk of arrest or IST determination.

**Strategies:**
- Collaborate with justice partners to analyze local IST trends, including who is being found IST and the pathways that lead to these determinations.
- Expand targeted mobile crisis and community-based BH services to reduce arrests among individuals at high risk.
- Conduct a Sequential Intercept Mapping (SIM) process with justice, health, and community partners to identify earlier opportunities for diversion and behavioral health support.

**Key Outcomes:**
- Reduction in the number of individuals found IST.
- Strengthened cross-system coordination between behavioral health and justice agencies.
- Improved access to community-based crisis and BH services for high-risk individuals.

# What's Next?

**Justice Involvement Office Hours:** Fri 8/15, 12-1 p.m.

Continued discussion on Justice Involvement data, dive into disparities analysis

**Removal of Children from the Home Webinar**: Tues 8/19, 12-1 p.m.

Questions:

managedcare@calmhsa.org

# Thank You!

**CalMHSA**
California Mental Health Services Authority